

FORM PTO-1618A Expires 06/30/99 03-23-2000



U.S. Department of Commerce Patent and Trademark Office TRADEMARK

1		
10	1296492	
DECORDATI	ON FORM COVER SHEE	:T
14. 6		-1
TO: The Commissioner of Patents and Trademarks	EMARKS ONLY St. Please record the attached o	riginal document(s) or copy(ies).
Submission Type	Conveyance Type	
X New	X Assignment	License
Resubmission (Non-Recordation)	Security Agreement	t Nunc Pro Tunc Assignme
Document ID #	Security Agreement	Effective Date
Correction of PTO Error	Merger	Month Day Year
Reel # Frame #	Change of Name	
Corrective Document Reel # Frame #	Other	
Conveying Party		
Conveying Fairy	Mark if additional names of conve	eying parties attached Execution Date Month Day Yea
Name Purchase Express, Inc.		02142000
Formark		
Formerly		
Individual General Partnership	Limited Partnership	Corporation Association
Other		
	ation Nevada	
Citizenship/State of Incorporation/Organiz Receiving Party		
Receiving Faity	Mark if additional names of rece	eiving parties attached
Name Healthlink International, Inc.		THE RESIDENCE OF THE PARTY OF T
		LINGHAL LEWE HICK WERE WERE ARREST ROOM LEWE BRITA HICK
Name Healthlink International, Inc. DBA/AKA/TA		
		02-22-2000
DBA/AKA/TA Composed of		
Composed of Address (line 1) 929 Eastwind Drive		02-22-2000
DBA/AKA/TA Composed of Address (line 1) Suite 225		U.S. Patent & TMOfc/TM Mail Ropt Dt. #6
DBA/AKA/TA Composed of Address (line 1) Address (line 2) Suite 225 Address (line 3) Westerville	ОН	02-22-2000 U.S. Patent & TMOfc/TM Mail Ropt Dt. #6
DBA/AKA/TA Composed of Address (line 1) Address (line 2) Suite 225 Address (line 3) Westerville City	State/Country	U.S. Patent & TMOfc/TM Mail Ropt Dt. #6 43081 Zip Code If document to be recorded is an
DBA/AKA/TA Composed of Address (line 1) 929 Eastwind Drive Address (line 2) Suite 225 Address (line 3) Westerville City Individual General Partnership		02-22-2000 U.S. Patent & TMOfc/TM Mail Ropt Dt. #6
DBA/AKA/TA Composed of Address (line 1) 929 Eastwind Drive Address (line 2) Suite 225 Address (line 3) Westerville	State/Country	U.S. Patent & TMOfc/TM Mail Ropt Dt. #6 43081 Zip Code If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic
DBA/AKA/TA Composed of Address (line 1) 929 Eastwind Drive Address (line 2) Suite 225 Address (line 3) Westerville City Individual General Partnership	State/Country	U.S. Patent & TMOfc/TM Mail Ropt Dt. #6 43081 Zip Code If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate & &
DBA/AKA/TA Composed of Address (line 1) Address (line 2) Suite 225 Address (line 3) Westerville City Individual General Partnership X Corporation Association	State/Country Limited Partnership	U.S. Patent & TMOfc/TM Mail Ropt Dt. #6 43081 Zip Code If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attained.
DBA/AKA/TA Composed of Address (line 1) 929 Eastwind Drive Address (line 2) Suite 225 Address (line 3) Westerville City Individual General Partnership X Corporation Association Other Citizenship/State of Incorporation/Organization	State/Country Limited Partnership ation Nevada	U.S. Patent & TMOfo/TM Mail Ropt Dt. #6 U.S. Patent & TMOfo/TM Mail Ropt Dt. #6 Zip Code If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)
DBA/AKA/TA Composed of Address (line 1) 929 Eastwind Drive Address (line 2) Suite 225 Address (line 3) Westerville Individual General Partnership X Corporation Association Other Citizenship/State of Incorporation/Organization	State/Country Limited Partnership	U.S. Patent & TMOfc/TM Mail Ropt Dt. #6 43081 Zip Code If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate & &

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief information Officer Weshington, D.C. 20231 and to the Office of information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503.

Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO RESEARCH ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:

Mail documents to be recorded with required cover sheet(s) information to: Commissioner of Patents and Trademarks, Box Assignments , Washington, D.C. 20231

TRADEMAR É

REEL: 002038 FRAME: 0084

FORM PTO-1 Expires 06/30/99 OMB 0651-0027	618B Page 2	U.S. Department of Commerce Patent and Trademark Office TRADEMARK
	epresentative Name and Address Enter for	the first Receiving Party only.
Name		
Address (line 1)		
Address (line 2)		
Address (line 3)		
Address (line 4)		
Correspond	ent Name and Address Area Code and Telephone N	lumber (614) 436-0600
Name	Jerry K. Mueller, Jr.	
Address (line 1)	Mueller and Smith, LPA	
Address (line 2)	7700 Rivers Edge Drive	
Address (line 3)	Columbus. OH 43235	
Address (line 4)		
Pages	Enter the total number of pages of the attached convincluding any attachments.	reyance document # 1
Trademark A	Application Number(s) or Registration Numb	er(s) Mark if additional numbers attached
Enter either the	Trademark Application Number or the Registration Number (DO NO	TENTER BOTH numbers for the same property).
	lemark Application Number(s)	Registration Number(s)
75895757	75894412 75894423	
75894422	75894413	
Number of	Properties Enter the total number of properties in	volved. #1
Fee Amoun	t Fee Amount for Properties Listed (37 0	CFR 3.41): \$ 200.00
	f Payment: Enclosed X Deposit Acc	
Deposit A (Enter for p	Account ayment by deposit account or if additional fees can be charged to the Deposit Account Number:	# 13-4830
	Authorization to charge addition	tional fees: Yes X No
01.1.1	O:	

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as

indicated herein.

Jerry K. Mueller, Jr.

Name of Person Signing

February 16, 2000

Date Signed

TRADEMARK REEL: 002038 FRAME: 0085

FORM PTO-1 Expires 06/30/99	618B P .	age 2	U.S. Department of Commerce Patent and Trademark Office TRADEMARK		
Domestic Representative Name and Address Enter for the first Receiving Party only.					
Name [
Address (line 1)					
Address (line 2)					
Address (line 3)					
Address (line 4)					
Correspondent Name and Address Area Code and Telephone Number (614) 436-0600					
Name	Jerry K. Mueller, Jr.				
Address (line 1)	Mueller and Smith, LPA				
Address (line 2)	7700 Rivers Edge Drive				
Address (line 3)	Columbus, OH 43235				
Address (line 4)					
Pages	Enter the total number of pages of the including any attachments.	attached conveyance document	# 1		
	Application Number(s) or Registr	· · · · · · · · · · · · · · · · · · ·	dditional numbers attached		
	Trademark Application Number or the Registration				
75895757		Registration Num	nber(s)		
75894422	75894413				
Number of	Properties Enter the total number of	of properties involved. #1			
Fee Amoun	t Fee Amount for Properti	es Listed (37 CFR 3.41): \$ 200.00)		
	f Payment: Enclosed X	Deposit Account			
Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: # 13-4830					
	Authorization	n to charge additional fees: Yes	X No		
Statement a	nd Signature				
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.					
Jerry K. Muel	$\times M$	Tullet Feb	oruary 16, 2000		
Name	of Person Signing	Signature	Date Signed		
		\ \ \			

TRADEMARK REEL: 002038 FRAME: 0086

ASSIGNMENT OF REGISTERED TRADEMARK

WHEREAS, Purchase Express, Inc., a corporation of the State of Nevada, having its principal office at 975 Eastwind Drive, Suite 190, Westerville, OH 43081, has adopted, used, and is using, and is the owner of the following trademarks for which application for registration in the United States Patent and Trademark Office has been made;

Trademark	Application No.	Application Date
EDENRIVER.COM	75/895,757	January 12, 2000
PURE RELIEF	75/894,412	January 12, 2000
IMMUNE 9-1-1	75/894,423	January 12, 2000
IMMUNE DAILY	75/894,422	January 12, 2000
EDEN RIVER	75/894,413	January 12, 2000

WHEREAS, Healthlink International, Inc., a corporation of the State of Nevada, having its principal office at 929 Eastwind Drive, Suite 225, Westerville, OH 43081, is desirous of acquiring said trademarks and the applications for registration thereon,

NOW, **THEREFORE**, in consideration of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, Purchase Express, Inc. hereby assigns to Healthlink International, Inc., all right, title, and interest in the United States in and to said trademarks and applications for registrations, together with the goodwill of the business symbolized by said trademarks and applications for registration thereon.

Signed at Westerville, Ohio, this /4 day of February 2000.

PURCHASE EXPRESS, INC.

EVERETTE. ARMOLD, PRESIDENT

State of Ohio) ss: County of Franklin)

RECORDED: 02/22/2000

On this <u>Iff</u> day of February, 2000, personally appeared Everett E. Armold to me known and known to me to be the President of Purchase Express, Inc., the assignor above-named, and acknowledged that he executed the foregoing Assignment on behalf of said assignor and pursuant to authority duly received.

CAMILLE ANGELA BUCCELLO

MY COMMISSION EXPIRES NOV. 21, 2001

Comille angela Buccello

Notary Public

TRADEMARK
REEL: 002038 FRAME: 0087