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OMB 0651-0027

U.S. Department of Commerce
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RECORDATION FORM COVER SHEET
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TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID #
- Correction of PTO Error
Reel # Frame #
- Corrective Document
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Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
Effective Date
Month Day Year
- Merger
- Change of Name
- Other

Conveying Party

Mark if additional names of conveying parties attached

Name

Execution Date
Month Day Year

Formerly

- Individual General Partnership Limited Partnership Corporation Association
- Other
- Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

- Individual General Partnership Limited Partnership
- Corporation Association
- Other

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.)

Citizenship/State of Incorporation/Organization

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

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments. #

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

Number of Properties

Enter the total number of properties involved. #

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.)
Deposit Account Number: #

Authorization to charge additional fees: Yes No

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.

MARK C. JACOBS, ESQ.

 5-26-00

Name of Person Signing

Signature

Date Signed

1 ASSIGNMENT

2 WHEREAS, Vortran Medical Technology, Inc., a firm domiciled in
3 Sacramento, California, and doing business at 3941 J Street, Suite 354,
4 Sacramento, CA 95819-3633, is the registrant of Trademark Registration No.
5 1,898,790 dated June 13, 1995, for the Trademark MINIHEART; and

6 WHEREAS, Westmed Holding Company, a corporation organized under the
7 laws of the State of Colorado whose principal place of business is situated at 6950
8 West Jefferson Avenue, Lakewood, CO 80235, has succeeded to the business,
9 assets and good will of said Vortran Medical Technology, Inc.

10 NOW THEREFORE, in consideration of and in exchange for the sum of One
11 Dollar (\$1.00) and other good and valuable consideration to it paid, the receipt of
12 which is hereby acknowledged, Vortran Medical Technology, Inc., does sell, assign,
13 and transfer, unto said Westmed Holding Company, the entire right, title, and interest
14 in and to the said trademark and the registration thereof, No. 1,898,790, together
15 with which the said mark is used.

16 IN WITNESS WHEREOF, I have hereunto set my hand and seal this

17 24 day of May, 2000.

18
19 BY: _____

20 Gordon Wong, President
21