

12-06-2000



FORMATION FORM COVER SHEET  
TRADEMARKS ONLY



11-20-2000

101540565

U.S. Patent & TMOs/TM Mail Rcpt Dt. #26

To the Honorable Commissioner of Patents and Trademarks: Please record the attached

Submission Type

- New
- Resubmission (Non-Recordation)  
Document ID # \_\_\_\_\_
- Correction of PTO Error  
Keel # \_\_\_\_\_ Frame # \_\_\_\_\_
- Corrective Document  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

11-20-00

Conveyance Type

- Assignment
- Security Agreement
- Merger
- Change of Name
- Other Certificate of Ownership and Merger
- License
- Nunc Pro Tunc Assignment  
Effective Date \_\_\_\_\_

Conveying Party

Name Mariner Post-Acute Network, Inc.  
Formerly \_\_\_\_\_  
 Individual  General Partnership  Limited Partnership  Corporation  Association  Other \_\_\_\_\_  
 Citizenship/State of Incorporation/Organization Delaware

Mark if additional names of conveying parties attached

Execution Date 11/17/00

Receiving Party

Name LCR, Inc.  
Address (line 1) One Ravinia Drive, Suite 1500  
Address (line 2) Atlanta Georgia 30346  
City State/Country Zip Code  
 Individual  General Partnership  Limited Partnership  Corporation  Association  Other \_\_\_\_\_  
 Citizenship/State of Incorporation/Organization Delaware

Mark if additional names of receiving parties attached

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of domestic representative should be attached. (Designation must be a separate document from Assignment)

Domestic Representative Name and Address

Name \_\_\_\_\_  
Address (line 1) \_\_\_\_\_

Enter for the first Receiving Party only.

Correspondent Name and Address

Name Ben D. Tobor  
Address (line 1) Bracewell & Patterson, L.L.P.  
Address (line 2) 711 Louisiana, Suite 2900, Houston, TX 77002

Area Code and Telephone Number 713/221-1352

Pages Enter the total number of pages of the attached conveyance document including any attachments 1

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

Either enter the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers)  
Trademark Application Number (s) \_\_\_\_\_ Registration Number(s) 2,117,454

Mark if additional numbers attached

Number of Properties Enter the total number of properties involved. 1

Fee Amount

Method of Payment: Enclosed  Deposit Account  Authorization to charge additional fees: Yes  No   
Deposit Account Number-enter for payment by deposit account or if additional fees can be charged to the account 50-0259

Fee Amount for Properties Listed (37 CFR 3.41): \$ 40.00

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.

Ben D. Tobor

Name of Person Signing

Signature 1371-009

Date Signed 11/17/00

ASSIGNMENT

WHEREAS, Mariner Post-Acute Network, Inc., a Delaware corporation, located and doing business at One Ravinia Drive, Suite 1500, Atlanta, Georgia 30346, is the owner of the service mark "PROGRESSIVE CARE CENTERS OF AMERICA AND DESIGN" and Registration No. 2,117,454 therefor; and

WHEREAS, LCR, Inc., a Delaware Corporation located and doing business at One Ravinia Drive, Suite 1500, Atlanta, Georgia 30346, desires to acquire the service mark of Mariner Post-Acute Network, Inc., and the goodwill of Mariner Post-Acute Network, Inc., associated with the service mark PROGRESSIVE CARE CENTERS OF AMERICA AND DESIGN and Registration No. 2,117,454 therefor.

NOW, THEREFORE, in consideration of and in exchange for the sum of \$10.00, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Mariner Post-Acute Network, Inc., does hereby sell, assign, and transfer, unto LCR, Inc., the entire right, title, and interest in and to the service mark PROGRESSIVE CARE CENTERS OF AMERICA, INC. AND DESIGN and Registration No. 2,117,454 therefor, together with the goodwill of the business in connection with which the service mark has been used.

MARINER POST-ACUTE NETWORK, INC.

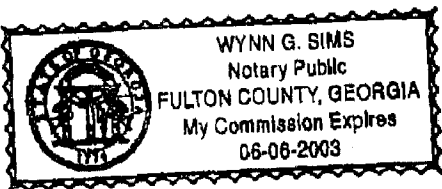
By: Stefano Miele

Printed Name: Stefano Miele

Title: Vice President, Assistant Secretary and Associate General Counsel

THE STATE OF GEORGIA )  
 )  
 COUNTY OF DEKALB )

BEFORE ME, the undersigned authority, on this 17<sup>th</sup> day of November, 2000 personally appeared Stefano Miele, an officer of Mariner Post-Acute Network, Inc., known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/~~she~~ executed the same of his/~~her~~ own free will for the purposes and consideration therein expressed, and that he/~~she~~ was authorized to execute the foregoing instrument on behalf of Mariner Post-Acute Network, Inc.



Wynn G. Sims  
 NOTARY PUBLIC, STATE OF GEORGIA