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U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): Hublink, Inc.

- Individual(s) Association General Partnership Limited Partnership Corporation-State -Ohio Other

Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment Merger Security Agreement Change of Name Other

Execution Date: October 17, 2000

2. Name and address of receiving party(ies)

Name: Healthcare.com Corporation Internal Suite 1100 Address: 1850 Parkway Place Street Address: City: Marietta State: GA Zip: 30067

- Individual(s) citizenship Association General Partnership Limited Partnership Corporation-State Georgia Other

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? Yes No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

1,897,849 2,005,024 1,897,381 2,066,140

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Michael D. Hobbs, Jr. Internal Address: Troutman Sanders LLP Bank of America Plaza Suite 5200 600 Peachtree St., NE Street Address: City: Atlanta State: GA Zip: 30308

6. Total number of applications and registrations involved: 4

7. Total fee (37 CFR 3.41) \$ 115.00

- Enclosed Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. 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.

Michael D. Hobbs, Jr. Name of Person Signing

[Signature] Signature

June 5, 2001 Date

Total number of pages including cover sheet, attachments, and document:

06/12/2001 GTON11 00000220 1897849

Mail documents to be recorded with required cover sheet information to: Commissioner of Patent & Trademarks, Box Assignments Washington, D.C. 20231

01 FC:481 40.00 OP 02 FC:482 75.00 OP

# Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

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TROUTMAN SANDERS LLP  
DIANE WALKER  
600 PEACHTREE STREET, SUITE 5200  
ATLANTA GA 30308

## CERTIFICATE OF MERGER

I, Cathy Cox, the Secretary of State of the Georgia, do hereby issue this certificate pursuant to Title 14 of the Official Code of Georgia annotated certifying that articles or a certificate of merger and fees have been filed regarding the merger of the below entities, effective as of the date shown above. Attached is a true and correct copy of the said filing.

Surviving Entity:

**HEALTHCARE.COM CORPORATION, A GEORGIA CORPORATION**

Nonsurviving Entity/Entities:

**HUBLINK, INC., AN OHIO CORPORATION**



  
CATHY COX  
SECRETARY OF STATE

TRADEMARK  
REEL: 002313 FRAME: 0125

**CERTIFICATE OF MERGER OF  
HUBLINK, INC.  
WITH AND INTO  
HEALTHCARE.COM CORPORATION**

The undersigned **DO HEREBY CERTIFY:**

**FIRST:** That the name and the state of incorporation of each of the constituent entities which are to merge are as follows:

<u>Name</u>	<u>State of Incorporation</u>
<b>HUBLINK, INC.</b>	Ohio
<b>HEALTHCARE.COM CORPORATION</b>	Georgia

**SECOND:** That the name of the surviving corporation shall be **HEALTHCARE.COM CORPORATION** (the "Surviving Corporation").

**THIRD:** That the executed Agreement and Plan of Merger is on file at the principal place of business of the Surviving Company, the address of which is 1850 Parkway Place, 11<sup>th</sup> Floor, Marietta, Georgia 30067.

**FOURTH:** That a copy of the Agreement and Plan of Merger will be furnished by the Surviving Company, on request and without cost, to any shareholder of any corporation that is a party to the merger.

**FIFTH:** That shareholder approval was not required to give effect to the Agreement and Plan of Merger.

**SIXTH:** That the Secretary of State of the State of Ohio is appointed agent of the Surviving Company on whom process in Ohio of any action, suit or proceeding for the

enforcement of an obligation of HUBLINK, Inc. may be served, and the address to which such process may be mailed is 1850 Parkway Place, 11<sup>th</sup> Floor, Marietta, Georgia 30067.

**SEVENTH:** That the request for publication of a notice of filing the Certificate of Merger and payment therefor will be made as required by O.C.G.A. Section 14-2-1105.1(6).

**IN WITNESS WHEREOF**, the undersigned have executed this Certificate of Merger as of the 17<sup>th</sup> day of October, 2000.

**HUBLINK, INC.**

By: Robert Murrin  
Name: ROBERT MURRIN  
Title: CFD

**HEALTHCARE.COM CORPORATION**

By: Joseph Blankenship  
Name: Joseph Blankenship  
Title: CFD