::ODMA\MHODMA\iManage;209413;1 Docket Nos. 2000	0.0002-000, 2000.0002-006, 2000.0005-000, 2000.0005-006
RE 07-05	-2001 R SHEET
To the Honorable Commissione	tached original documents or copy thereof.
Name of conveying party(ies)	8438 Name and address of receiving party(ies)
ADDS, Inc.	Name: Telepharmacy Solutions, Inc.
9	Internal Address:
	Street Address: 267 Boston Road, Suite 27
[ ] Individual(s) [ ] Association [ ] General Partnership [ ] Limited Partnership	
[X] Corporation - State of Massachusetts	City: North Billerica State: MA ZIP: 01862
[ ] Other	[ ] Association
Additional name(s) of conveying party(ies) attached? [] Yes [X] No	[ ] Individual(s) citizenship
3. Nature of conveyance:	[ ] Association
	[ ] General Partnership
[ ] Assignment [ ] Merger	[X] Corporation-State Massachusetts
[ ] Security Agreement [X ] Change of Name	[ ] Other
[ ] Other	If assignee is not domiciled in the United States, a domestic representative designation is attached:  [] Yes [X] No
Execution Date: January 31, 2000	(Designations must be a separate document from assignment)
A A viliation with a contraction with a contraction	Additional name(s) & address(es) attached? [ ] Yes [X] No
4. Application number(s) or registration number(s):	D. Trademark Designation No. (c)
A. Trademark Application No.(s) 75/713,866	B. Trademark Registration No.(s)
75/713,678	
75/979,452	
75/979,453	( ( ) ( ) ( ) ( ) ( ) ( )
Additional number	
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations [4] involved:
Name: Thomas O. Hoover	7. Total Fee (37 C.F.R. 3.41)
Internal Address:	[X] Enclosed
	[X] Authorized to charge any deficiencies or credit any
Hamilton, Brook, Smith & Reynolds, P.C.	overpayment to deposit account  [ ] Authorized to be charged to deposit account
	[ ] Number to be changed to deposit decount
Street Address: Two Militia Drive	8. Deposit account number:
	08-0380
City: Lexington State: MA ZIP: 02421-4799	(Attach duplicate copy of this page if paying by deposit account)
DO NOT	USE THIS SPACE
9. Statement and signature.	ion is true and correct and any attached copy is a true copy of the original
Thomas O. Hoover	Manuelle June 22, 2001
Name of Person Signing	Signature Date
The latest transfer of transfer of the latest	ver sheet, attachments, and document: [3]
Total number of pages including co	ver sheet, attachments, and document: [3]

#### CERTIFIED PER Germania

William Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Boston, Massachusetts 02108-1512

AMENDED FOREIGN CORPORATION CERTIFICATE
(General Laws, Chapter 181, Section 4)

		of the second
We, Brian Hart	Life gradie i Tagle de L Suit MAN BURNE : S	
Anthur Berube	lasting and	
indi	XKENXXXSKER	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
ADDS, Inc.	n de la companya de l	
	e of corporation)	
(Ext.) num	e of corporation,	
n compliance with the provisions of General Laws, Chap	ster 181, Section 4, certify	y that:
. The name of the corporation has been changed to:		
Telepharmacy Solutions, Inc.		그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
. The location of its principal office has been changed to	<b>)</b> :	
3. The location of its local office in the Commonwealth of	i Massachusetts has been	changed to:
The ministra Carres and the Commence	aulih af Massashussuta ha	
The activities of the corporation within the Commonwo	eatth of wiassachuseus ha	ive been changed to:
i. The date of the corporation's fiscal year end has been c	hanged to	
7. The date of the compensation in the year and the second		사람들은 사람들이 되었다. 
i. The name and street address of the resident agent of the	e corporation in the Com	monwealth of Massachusetts
<b>3:</b>		
		그 기가 가장 그 사람이 없다.
7. The jurisdiction under the laws of which the corporation	on is organized or governo	ed has been changed to:
S. Other:		
s. Other:		n de la companya de La companya de la co
SIGNED UNDER THE PENALTIES OF PERJURY, this	31st <sub>day of</sub> Janua	ary 2000
SIGNED ONDER THE FEMAL CIED OF CEROON I, WIS-		
× 430-71/-		
NIX /44		*President / * Vice Presiden
166 // /		
Maria Gente	*Clerk / *Assistant Cl	erk or *Secretary/*Asst. Secretary
*Delete the inapplicable words.		
Note: If this amendment involves a change of name or jurisdiction, a ce	ertificate of such change issued	by an officer or agency properly authorized ertificate. If such certificate is in a langu <mark>ag</mark>

2/16/95

other than English, a translation thereof under the oath of the translator must be attached.

TRADEMARK REEL: 002323 FRAME: 0686

A THE SECOND

# 090 1998

#### THE COMMONWEALTH OF MASSACHUSETTS

## AMENDED FOREIGN CORPORATION CERTIFICATE (General Laws, Chapter 181, Section 4)

Inlen Freningalich

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

A TRUE COPY ATTEST

Option Substitute

WILLIAM FRANCIS GALVIN
SECRETARY OF THE COMMONWEALTH

DATE 3 23 C CLERK A 6 5

OOFEB-1 PM 3: 40

### TO BE FILLED IN BY CORPORATION

Photocopy of document to be sent to:

John H. Chu Chu, Ring & Hazel LLP

253 Summer St.

Boston, MA 02210

617-443-9800

Telephone: -