



01-11-2002



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Our Ref.: 3659-1

Commissioner of Patents and Trademarks,
Box Assignments, Washington, DC 20231

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

<p>1. Name of conveying party(ies): Intellicardia, Inc.</p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State: Delaware <input type="checkbox"/> Other: _____</p> <p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Assignment <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other: _____</p> <p>Execution Date: <u>31 August 2001</u></p>	<p>2. Name and address of receiving party(ies): Name: <u>CHF Solutions, Inc.</u> Internal Address: _____ Street Address: <u>3960 Broadway</u> _____ City: <u>New York</u> State/Country: <u>New York</u> Zip: <u>10032</u></p> <p><input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation-State <u>Delaware</u> <input type="checkbox"/> Other _____</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Designations must be a separate document from Assignment) Additional name/s & address/es attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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4. Application number(s) or registration number(s):
If this document is being filed together with a new application, the execution date of the application is: _____

<p>A. Trademark Application No.(s)</p> <p>(1) <u>76/292,588</u> (2) <u>76/292,589</u> (3) <u>76/292,590</u></p>	<p>B. Trademark Registration No.(s)</p> <p>(1) _____ (2) _____ (3) _____</p>
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Additional numbers attached? Yes No

<p>5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Jeffry H. Nelson</u> Internal Address: _____ _____ Street Address: <u>Nixon & Vanderhye P.C.</u> <u>1100 North Glebe Road</u> <u>8th Floor</u> City <u>Arlington</u> State: <u>VA</u> Zip: <u>22201</u></p>	<p>6. Total number of applications and registrations involved: <u>3</u></p> <p>7. Total fee (37 CFR 3.41) \$ <u>90.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account #14-1140</p> <p>8. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.</p>
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DO NOT USE THIS SPACE

9. Statements 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.

Jeffry H. Nelson [Signature] January 8, 2002
Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments and document: 3

01/11/2002 TBIAZ1 00000007 76292588

01 FC:481 40.00 OP
02 FC:482 50.00 OP

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "INTELLICARDIA, INC.", CHANGING ITS NAME FROM "INTELLICARDIA, INC." TO "CHF SOLUTIONS, INC.", FILED IN THIS OFFICE ON THE TENTH DAY OF SEPTEMBER, A.D. 2001, AT 9:05 O'CLOCK A.M.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1340672

010453656

DATE: 09-13-01

TRADEMARK
REEL: 002419 FRAME: 0845

CERTIFICATE OF AMENDMENT

OF THE

SIXTH AMENDED AND RESTATED CERTIFICATE OF INCORPORATION OF

INTELLICARDIA, INC.

The undersigned corporation, in order to amend its Sixth Amended and Restated Certificate of Incorporation (the "Certificate of Incorporation"), hereby certifies as follows:

FIRST: The name of the corporation is Intellicardia, Inc.

SECOND: The corporation hereby amends its Certificate of Incorporation as follows:

Article FIRST of the Certificate of Incorporation, relating to the name of the corporation, is hereby amended to read in its entirety as follows:

FIRST: The name of the Corporation is CHF Solutions, Inc.

THIRD: The Amendment to the Certificate of Incorporation effected herein was duly adopted in accordance with the applicable provisions of Sections 228 and 242 of the General Corporation Law of the State of Delaware.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Amendment, this 3 day of August, 2001.

INTELLICARDIA, INC.

By.



Name: Howard R. Levin, M.D.

Title: President