

05-08-2002



RECORDATION  
TRA

FINANCE SECTION

TO: The Commissioner of Patents and Trademarks: Please refer to 102080820

copy(ies).

Submission Type

New

Resubmission (Non-Recordation)  
Document ID#

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel #  Frame #

4.26.02

Conveyance Type

Assignment  License

Security  Nunc Pro Tunc Assignment

Merger

Change of Name

Other

Effective Date  
Month Day Year  
8/2/99

Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

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  Association

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

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.)

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

05/07/2002 GTON11 00000148 1672037 Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231  
01 FC:481 40.00 DP  
DUR1312867\_1

TRADEMARK  
REEL: 002500 FRAME: 0921

**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)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,672,037"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

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

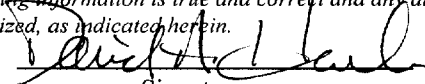
Method of Payment: Enclosed  Deposit Account   
Deposit Account  
(Enter for payment by deposit account or if additional fees can be charged to the account.)

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.

David A. Harlow  
Name of Person Signing

  
Signature

4/19/02  
Date Signed

JAN 29 2002

RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

New *1-29-02*

Resubmission (Non-Recordation)  
Document ID#

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel #  Frame #

Conveyance Type

Assignment  License

Security  Nunc Pro Tunc Assignment

Merger

Change of Name

Other

Effective Date  
Month Day Year

Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

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  Association

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

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.)

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

00115 1572073  
 40.00 DP  
 200.00 DP  
 01191  
 01191  
 01191

**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)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,672,073"/>	<input type="text" value="1,695,540"/>	<input type="text" value="1,975,488"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,362,595"/>	<input type="text" value="1,738,579"/>	<input type="text" value="1,973,536"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,975,501"/>	<input type="text" value="1,984,797"/>	<input type="text" value="1,967,495"/>

**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.

David A. Harlow  
Name of Person Signing

David A. Harlow  
Signature

23 OCT 2001  
Date Signed

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS FILED FROM AND INCLUDING THE RESTATED CERTIFICATE OF "PHYAMERICA PHYSICIAN GROUP, INC." AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

RESTATED CERTIFICATE, CHANGING ITS NAME FROM "COASTAL HEALTHCARE GROUP, INC." TO "COASTAL PHYSICIAN GROUP, INC.", FILED THE EIGHTEENTH DAY OF MAY, A.D. 1995, AT 1 O'CLOCK P.M.

CERTIFICATE OF DESIGNATION, FILED THE TWENTY-SECOND DAY OF JANUARY, A.D. 1997, AT 12 O'CLOCK P.M.

CERTIFICATE OF DESIGNATION, FILED THE TWENTY-SECOND DAY OF JANUARY, A.D. 1997, AT 12:01 O'CLOCK P.M.

CERTIFICATE OF DESIGNATION, FILED THE TWENTY-FOURTH DAY OF FEBRUARY, A.D. 1997, AT 11:51 O'CLOCK A.M.

CERTIFICATE OF DESIGNATION, FILED THE FIFTH DAY OF JUNE, A.D. 1997, AT 9 O'CLOCK A.M.

CERTIFICATE OF DESIGNATION, FILED THE THIRTIETH DAY OF JUNE, A.D. 1998, AT 3 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "COASTAL



Edward J. Freel

Edward J. Freel, Secretary of State

2294364 8100X

991540894

AUTHENTICATION: 0143724

DATE: 12-15-99

TRADEMARK

REEL: 002500 FRAME: 0925

Office of the Secretary of State

---

PHYSICIAN GROUP, INC." TO "PHYAMERICA PHYSICIAN GROUP, INC.",  
FILED THE SECOND DAY OF AUGUST, A.D. 1999, AT 11 O'CLOCK A.M.



A handwritten signature in cursive script, reading "Edward J. Freel".

---

Edward J. Freel, Secretary of State

2294364 8100X

AUTHENTICATION:

0143724

DATE:

TRADEMARK

REEL: 002500 FRAME: 0926

**CERTIFICATE OF AMENDMENT  
OF  
RESTATED CERTIFICATE OF INCORPORATION  
OF  
COASTAL PHYSICIAN GROUP, INC.**

Coastal Physician Group, Inc., a corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware, does hereby certify:

**FIRST:** That at a duly held meeting of the Board of Directors of Coastal Physician Group, Inc., resolutions were duly adopted setting forth proposed amendments to the Restated Certificate of Incorporation of said corporation, declaring said amendments to be advisable and calling a meeting of the stockholders of said corporation for consideration thereof. The resolutions setting forth the proposed amendments are as follows:

**RESOLVED,** that the Restated Certificate of Incorporation of this corporation be amended by changing Section 1 thereof so that, as amended, said section shall be and read as follows:

"1. The name of the corporation (the "Corporation") is PhyAmerica Physician Group, Inc."

**RESOLVED,** that the Restated Certificate of Incorporation of the corporation be amended by changing Section 4(a) thereof so that, as amended said section shall be and read as follows:

"4(a) The Corporation shall have the authority to issue Two Hundred Million (200,000,000) shares of common stock with a par value of One Cent (\$0.01) per share. One Hundred Million (100,000,000) shares shall be designated as 'Common Stock.' Holders of Common Stock shall be entitled to cast one (1) vote in person or by proxy for each share of Common Stock upon all matters upon which shareholders are entitled to vote or to which shareholders are entitled to give consent. One Hundred Million (100,000,000) shares shall be designated as 'Non-Voting Common Stock.' Except as may otherwise be required by law, the holders of Non-Voting Common Stock shall have no voting rights and shall not vote. Holders of Common Stock and Non-Voting Common Stock shall be entitled to share ratably in all such dividends or distributions, payable in cash or otherwise, as may be declared thereon by the Board of Directors from time to time out of assets or funds of the Corporation legally available therefor."

**SECOND:** That thereafter, pursuant to resolution of its Board of Directors, the annual meeting of the stockholders of said corporation was duly called and held on July 29, 1999, upon notice in accordance with Section 222 of the General Corporation Law of the State of Delaware at which meeting the necessary number of shares as required by statute were voted in favor of the amendments.

**THIRD:** That said amendments were duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

IN WITNESS WHEREOF, said COASTAL PHYSICIAN GROUP, INC. has caused this certificate to be signed by W. Randall Dickerson, its Executive Vice President, this 2nd day of August, 1999.

COASTAL PHYSICIAN GROUP, INC.

By:   
W. Randall Dickerson  
Executive Vice President



PhyAmerica Physician Group, Inc.  
(Delaware corporation)

U.S. Trademarks

Registered Marks

Mark	Registration No.	Date Registered
BLIP LOGO	1,672,073	01/14/92
BLIP LOGO	1,362,595	09/24/85
DOCTORS HEALTH PLAN	1,975,501	05/21/96
FIRSTCOLLECT	1,695,540	06/16/92
MEDSTAFF National Medical Staffing, Inc. & Design	1,738,579	12/08/92
THE PHYSICIAN COMPANY	1,984,797	07/02/96
THE PHYSICIAN COMPANY	1,975,488	05/31/96
THE PHYSICIAN COMPANY	1,973,536	05/07/96
THE PHYSICIAN COMPANY	1,967,495	04/09/96