FORM PTO-1594

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T-880 P.001/004 F-995

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

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	Total number of pages including cover sheet, attachments, and document 4		
Gregory C. Golla Name of Person Signing	Signature Date		
To the best of my knowledge and belief, the foregoing information original document.	mation is true and correct and any attached copy is a true copy of the		
9. Statement and signature:			
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Minneapolis, MN 55402-0910	Please charge any additional fees or credit any overpayments to our Deposit account number: 13-2725		
Name: Gregory C. Golla Address: MERCHANT & GOULD P.C. P.O. Box 2910	7. Total fee (37 CFR 3.41): \$190.00 Enclosed Authorized to be charged to deposit account		
Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and trademarks involved: 7		
Additional number	rs attached? 🔲 Yes 🗵 No		
76/287,347 76/386,197	2,574,470		
76/122,302 76/287,348	2,522,457 2,599,018		
A. Trademark Application No.(s)/ Mark(s)	B. Trademark Reg. No.(s)/Mark(s)		
4. Application number(s) or trademark number(s):			
	Additional name(s) & address(es) attached? Yes No		
	☐ Yes ☒ No (Designations must be separate document from Assignment)		
Execution Date: August 12, 2002	If assignce is not domiciled in the United States, a domestic representative designation is attached:		
3. Nature of conveyance: Assignment Merger Security Agreement Change of Name Other:	Individual(s) citizenship General Partnership Corporation-State of Delaware Other:		
Additional name(s) of conveying party(ies) attached? Yes No			
☐ Individuals ☐ Association ☐ General Partnership ☐ Limited Partnership ☐ Corporation-State of Minnesota ☐ Other:			
cMore Medical Solutions, Inc.	ProVation Medical, Inc. 800 Washington Avenue North, Suite 400 Minneapolis, Minnesota 55401		
1. Name of conveying party(ies):	2. Name and address of receiving party(ies):		
To the Commissioner of Patents and Trademarks: Please record			

Mail documents to be recorded with required cover sheet information to:

Commissioner for Parents and Trademarks Box Assignments

Washington, D.C. 20231

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> **TRADEMARK** REEL: 002529 FRAME: 0223

FROM-Merchant & Gould

9-02

TRADEMARK ASSIGNMENT

WHEREAS, cMore Medical Solutions, Inc., a Minnesota corporation, located at 800 Washington Avenue North, Suite 400, Minneapolis, MN, 55401 ("Assignor") is the owner of the right and title to the applications for and marks in the attached Schedule A (the "Marks");

WHEREAS, prior to the effective date of this Assignment, Assignor was the owner of the entire right, title and interest in the Marks, free and clear of any liens and encumbrances, and the Assignor was the owner of the corresponding federal trademark applications and registrations; and

WHEREAS, **ProVation Medical, Inc.**, a Delaware corporation, located at 800 Washington Avenue North, Suite 400, Minneapolis, MN, 55401 ("Assignee"), is desirous of confirming that it has acquired from Assignor through transfer of all of the assets of Assignor, all right, title and interest in and to said Marks and trademark applications and registrations, and associated goodwill of the business;

WHEREAS, Assignee is the successor to the business of Assignor and such business is on-going and existing;

TRADEMARK
REEL: 002529 FRAME: 0224

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applications and registrations and all common law trademark rights in said Marks, and with the goodwill and other incidents of its business associated with or symbolized by said Marks. Assignor agrees to take all actions, execute additional documents and to otherwise cooperate as requested by Assignee as is necessary or reasonable to assign, transfer, perfect, record, maintain, register or enforce the rights of Assignee in and to the Marks, at the expense of Assignee.

IN WITNESS WHEREOF, the Assignor has caused this instrument to be executed by its duly authorized representative.

cMore Medical Solutions, Inc.

Dated: August 12, 2002

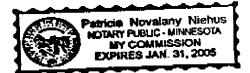
State of Minaposto

County of Hennenin

August On this **/2** of _____, 2002, before me personally appeared the person described in and who executed the foregoing instrument, and being first duly sworn, stated that s/he had authority to sign the above Assignment, on his/her Company's behalf and that s/he did so of his/her free will, and s/he duly acknowledged to me that s/he executed the same for the uses and purposes therein set forth.

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Notary Public / Notary Public



SCHEDULE A

Trademark Applications

TRADEMARK	SERIAL NO.	FILING DATE
PROCEDURES IN A WHOLE NEW LIGHT	76/122,302	09/05/2000
CMORE MEDICAL SOLUTIONS	76/287,347	07/19/2001
CLINOVATION	76/287,348	07/19/2001
CLINICAL PRODUCTIVITY BY DESIGN	76/386,197	03/22/2002

Trademark Registrations

TRADEMARK	REG. NO.	REG. DATE
PROVALENT	2,522,457	1/25/2001
COMMENDATION	2,574,470	05/28/2002
PROVATION	2,599,018	07/23/2002

TRADEMARK REEL: 002529 FRAME: 0226