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OMB No. 0651-0011 (exp. 4/94)

TRADEMARK 102150134

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

<p>1. Name of conveying party(ies): Velocimed Management, Inc.</p> <p style="text-align: right; font-size: 2em; font-family: cursive;">06/17/02</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 – <u>State of Delaware</u> <input type="checkbox"/> Other</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies): Name: Velocimed, Inc. Internal Address: JUN 1 2002 Street Address: 11400 73rd Avenue North City: Maple Grove State: MN ZIP: 55369</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 – <u>State of 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 type="checkbox"/> No</p> <p>(Designations must be a separate document from assignment) Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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3. Nature of conveyance:

Assignment Merger
 Security Agreement Change of Name
 Other

Effective Date: April 10, 2002

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

A. Trademark Application No(s).
78/105,688 FlowShield
78/121,196 Proxis
78/121,198 CrossGuard

Additional numbers attached? Yes No

B. Trademark Registration No(s).

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

Name: **Erika S. Koster, Esq.**
Firm: **Oppenheimer Wolff & Donnelly LLP**
Internal Address: **Suite 3300**
Street Address: **45 South Seventh St.**
City: **Minneapolis** State: **MN** ZIP: **55402-1609**
Our File No.: **20816/2000**

6. Total number of applications and registrations involved: **-3-**

7. Total Fee (37 CFR 3.41) \$90.00
 Enclosed
 Authorized to be charged to Deposit Account
 Authorized to charge any underpayment or credit any overpayment to Deposit Account.

8. Deposit account number:
50-1901
(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.

Erika S. Koster, Esq. June 13, 2002
Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments, and document: **-2-** (cover sheet & postcard)

Mail documents to be recorded with required cover sheet information to:
U.S. Patent and Trademark Office, Office of Public Records, Crystal Gateway 4, Room 335
Washington, D.C. 20231

07/09/2002 DBYRNE 00000120 501901 78105688

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

**SUPPORTING DOCUMENTATION FOR TRADEMARK
CHANGE OF NAME DOCUMENTS IS**

NO LONGER REQUIRED

UNDER THE

TRADEMARK LAW TREATY ACT

EFFECTIVE

OCTOBER 30, 1999