

FORM PTO-1618A
Expires 06/30/99
OMB0651-0027

04-07-2003



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TO: The Commissioner of Patents and Trademarks, U.S. Patent and Trademark Office, Washington, D.C. 20503. Please record the attached original document(s) or copy(ies).

Submission Type

☒ New

☐ Resubmission (Non-Recordation)

Document ID#

☐ Correction of PTO Error

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☐ Corrective Document

Reel #

Frame #

Conveyance Type

☐ Assignment

☐ License

☐ Security

☐ Nunc Pro Tunc Assignment

☐ Merger

☐ Change of Name

☒ Other

Notice of Grant of Security Interest

Effective Date
Month Day Year
12/11/01

Conveying Party

☐ Mark if additional names of conveying parties attached

Name

HealthTronics Surgical Services, Inc.

Execution Date
Month Day Year

12/11/01

Formerly

☐ Individual

☐ General Partnership

☐ Limited Partnership

☒ Corporation

☐ Association

☐ Other

☒ Citizenship/State of Incorporation/Organization

Georgia

Receiving Party

☐ Mark if additional names of receiving parties attached

Name

Bank of America, N.A., as Agent

DBA/AKA/TA

Composed of

Address (line 1)

1455 Market Street

Address (line 2)

CA5-701-05-19

Address (line 3)

San Francisco

City

CA

State/Country

94103

Zip Code

☐ Individual

☐ General Partnership

☐ Limited Partnership

☐ Corporation

☐ Association

☒ Other

National Banking Association

☐ Citizenship/State of

Incorporation/Organization

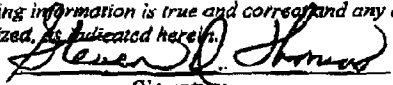
If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

04/23/2002 TDR21 0000005 76294082

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01 FE-801 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 (0651-0827), 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

FORM PTO-1618B Expires 06/30/99 OMB 0651-0027		Page 2	U.S. Department of Commerce Patent and Trademark Office TRADEMARK
Domestic Representative Name and Address Enter for the first Receiving Party Only.			
Name <input type="text"/>			
Address (line 1) <input type="text"/>			
Address (line 2) <input type="text"/>			
Address (line 3) <input type="text"/>			
Address (line 4) <input type="text"/>			
Correspondent Name and Address Area Code and Telephone Number <input type="text" value="(919) 286-8000"/>			
Name <input type="text" value="Steven D. Thomas"/>			
Address (line 1) <input type="text" value="Moore & Van Allen PLLC"/>			
Address (line 2) <input type="text" value="2200 West Main Street"/>			
Address (line 3) <input type="text" value="Suite 800"/>			
Address (line 4) <input type="text" value="Durham, North Carolina 27705"/>			
Pages Enter the total number of pages of the attached conveyance document including any attachments. # <input type="text" value="3"/>			
Trademark Application Number(s) or Registration Number(s) <input type="checkbox"/> 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" value="76/294,082"/>	<input type="text" value="76/129,879"/>	<input type="text" value="2,500,166"/>	<input type="text" value="2,226,513"/>
<input type="text" value="76/293,202"/>	<input type="text"/>	<input type="text" value="2,175,455"/>	<input type="text" value="2,154,207"/>
<input type="text" value="76/293,167"/>	<input type="text"/>	<input type="text" value="2,139,652"/>	<input type="text"/>
Number of Properties Enter the total number of properties involved. # <input type="text" value="9"/>			
Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$ <input type="text" value="240.00"/>			
Method of Payment: Enclosed <input checked="" type="checkbox"/> Deposit Account <input checked="" type="checkbox"/> Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: # <input type="text" value="13-4365"/> Authorization to charge additional fees: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
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. <input type="text" value="Steven D. Thomas"/>  <input type="text" value="April 4, 2002"/> Name of Person Signing Signature Date Signed			

HealthTronics Surgical Services, Inc.
(Georgia Corporation)

U.S. Trademarks

Registered Marks

HEALTHTRONICS	2,500,166	10/23/01
LITHOTRON	2,175,455	7/21/98
ORTHOTRIPSY	2,139,652	2/24/98
NEWTRODE	2,226,513	2/23/99
OSSATRON	2,154,207	4/28/98

Pending Applications

CYSTOTRON	76-294,082	8/1/01
TWINTRODE	76-293,202	8/1/01
LITHOTRON FOCUS	76-293,167	8/1/01
ORTHOTRIPTER	76-129,879	9/15/00

NOTICE
OF
GRANT OF SECURITY INTEREST
IN
TRADEMARKS

United States Patent and Trademark Office

Gentlemen:

Please be advised that pursuant to the Security Agreement dated as of December 11, 2001 (the "Security Agreement") by and among the Obligors party thereto (each an "Obligor" and collectively, the "Obligors") and Bank of America, N.A., as Agent (the "Agent") for the Lenders referenced therein (the "Lenders"), the undersigned Obligor has granted a continuing security interest in and continuing lien upon, the trademarks and trademark applications shown below to the Agent for the ratable benefit of the Lenders:

TRADEMARKS

<u>Trademark No.</u>	Description of Trademark <u>Item</u>	Date of <u>Trademark</u>
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See Attached

Trademark Applications

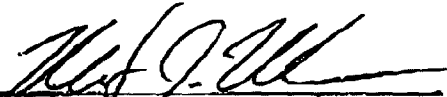
<u>Trademark Applications No.</u>	Description of Trademark <u>Applied For</u>	Date of Trademark <u>Applications</u>
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See Attached

The Obligors and the Agent, on behalf of the Lenders, hereby acknowledge and agree that the security interest in the foregoing trademarks and trademark applications (i) may only be terminated in accordance with the terms of the Security Agreement and (ii) is not to be construed as an assignment of any trademark or trademark application.


Very truly yours,

**HEALTHTRONICS SURGICAL
SERVICES, INC.**

By: 
Name: MARK S. MCGARRAN
Title: CHIEF FINANCIAL OFFICER

Acknowledged and Accepted:

BANK OF AMERICA, N.A., as Agent

By: 
Name: Philip Duane
Title: PRINCIPAL

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