

Form PTO-1594  
(Rev. 10/02)  
OMB No. 0651-0027 (exp. 6/30/2005)  
Tab settings

### RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE  
U.S. Patent and Trademark Office

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

1. Name of conveying party(ies):  
Medco Health Prescription Solutions, L.L.C.

Individual(s)                       Association  
 General Partnership             Limited Partnership  
 Corporation-State  
 Other Limited Liability Company

Additional name(s) of conveying party(ies) attached?  Yes  No

2. Name and address of receiving party(ies)  
Name: Medco Health Solutions, Inc.  
Internal  
Address: \_\_\_\_\_  
Street Address: 100 Parsons Road  
City: Franklin Lakes State: NJ Zip: 07417

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation-State Delaware  
 Other \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
 (Designations must be a separate document from assignment)  
 Additional name(s) & address(es) attached?  Yes  No

3. Nature of conveyance:  
 Assignment                               Merger  
 Security Agreement                     Change of Name  
 Other \_\_\_\_\_

Execution Date: 12/26/2002

4. Application number(s) or registration number(s):  
 A. Trademark Application No.(s) \_\_\_\_\_  
 \_\_\_\_\_

B. Trademark Registration No.(s) 1987723, 1034064,  
1799626, and 1676055

Additional number(s) attached  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:  
 Name: Susan C. Mattson  
 Internal Address: WS3B-07  
Merck & Co., Inc.  
PO Box 100  
 Street Address: One Merck Drive  
Whitehouse Station  
 City: \_\_\_\_\_ State: NJ Zip: 08889

6. Total number of applications and registrations involved: 4

7. Total fee (37 CFR 3.41).....\$ 115.00  
 Enclosed  
 Authorized to be charged to deposit account

8. Deposit account number:  
13-2752

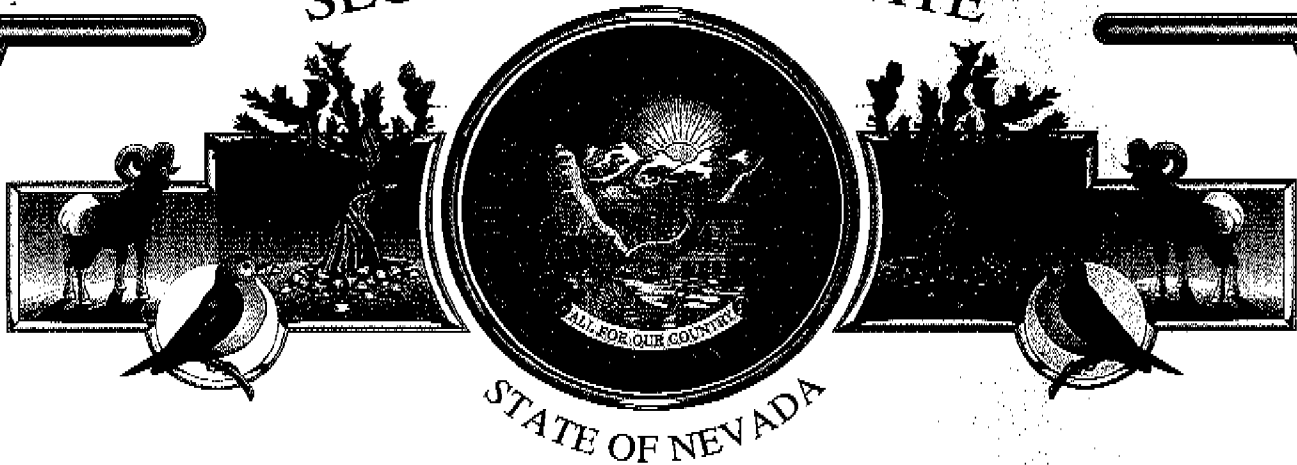
DO NOT USE THIS SPACE

9. Signature.  
Susan C. Mattson                              Susan C. Mattson                              May 23, 2003  
 Name of Person Signing                              Signature                              Date

Total number of pages including cover sheet, attachments, and document: 2

Mail documents to be recorded with required cover sheet information to:  
Commissioner of Patent & Trademarks, Box Assignments  
Washington, D.C. 20231

# SECRETARY OF STATE



I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited partnerships, limited-liability partnerships and business trusts, pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that there was filed in this office on December 26, 2002

ARTICLES OF MERGER  
merging  
MEDCO HEALTH PRESCRIPTION SOLUTIONS, L.L.C.  
(A NEVADA LIMITED-LIABILITY COMPANY)  
into  
MEDCO HEALTH SOLUTIONS, INC.  
(A DELAWARE CORPORATION)



IN WITNESS WHEREOF, I have here unto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on April 21, 2003.

*Dean Heller*

DEAN HELLER  
Secretary of State

By *Jean Carson*

Certification Clerk