

02-03-2003

Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002) Tab settings



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

102354369

To the Honorable Commissioner of Patents and Trademarks, original documents or copy thereof.

1. Name of conveying party: MediSpa Group LLC
Individual(s) Association General Partnership Limited Partnership Corporation Limited Liability Company - State of California
Additional name(s) of conveying party(ies) attached? Yes No

1-29-03

2. Name and address of receiving party: Name: SkinSpirit LLC Internal Address: Street Address: 1515 El Camino Real, Suite B City: Palo Alto State: California Zip: 94306
Individual(s) citizenship Association General Partnership Limited Partnership Corporation Limited Liability Company - State of California

3. Nature of conveyance: Assignment Merger Security Agreement Change of Name Other
Execution Date: September 19, 2002

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

4. Application number(s) or registration number(s): A. Trademark Application Nos.: 78/157,464 78/157,471 78/157,467 78/157,472
Additional number(s) attached Yes No

B. Trademark Registration No(s):

RECORDS SECTION PH 2:13

5. Name and address of party to whom correspondence concerning document should be mailed: Name: R.J. Heher, Esq. Internal Address: Fenwick & West LLP Street Address: Silicon Valley Center 801 California Street City: Mountain View State: CA Zip: 94041

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: 52-0261
(Attach duplicate copy of this page if paying by deposit account)

02/03/2003 LMUELLER 00000025 78157464
01 FC: 521 40.00 OP
02 FC: 522 75.00 OP

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.
R.J. Heher Signature Date 1/28/2003

Express Mail mailing label No. EV 25574717245 Date of Deposit 1/29/03 Total number of pages including cover sheet, attachments, and document: 3

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Postal Office to Commissioner of Patent & Trademarks, Box Assignments Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Trademark, 2900 Crystal Dr. Arlington, VA 22202-3513, Washington, D.C. 20231

LARISA BURSHTEYN (Type or Print Name of Person Mailing Paper or Fee) Signature



State of California
Bill Jones
Secretary of State

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

NOV 22 2002

**LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT**

A \$30.00 filing fee must accompany this form
IMPORTANT - Read instructions before completing this form.

BILL JONES, Secretary of State

This Space For Filing Use Only

1. Secretary of State File Number:
200211310073

2. Name of Limited Liability Company:
MediSpa Group LLC

3. Complete only the sections where information is being changed. Additional pages may be attached if necessary.

A. Limited Liability Company Name (and the name with the words "Limited Liability Company," "Ltd. Liability Co." or the abbreviations "LLC" or "L.L.C.")

SkinSpirit LLC

B. The Limited Liability Company will be managed by (Check One):

[] one manager [] more than one manager [] single member limited liability company [] all limited liability company members

C. Amendment to text of the Articles of Organization:

D. Other matters to be included in this certificate may be set forth on separate attached pages and are made a part of this certificate. Other matters may include a change in the latest date on which the limited liability company is to dissolve or any change in the events that will cause the dissolution.

4. Future Effective Date, if any: Month Day Year

5. Number of pages attached, if any:

6. Declaration: It is hereby declared that I am the person who executed this instrument, which execution is my act and deed.

Signature of Authorized Person

LYNN HEUBLEIN
Type or Print Name and Title Member

9/19/02
Date

7. RETURN TO:

NAME

FIRM

ADDRESS

CITY/STATE

ZIP CODE

Business Filings Incorporated
8025 Excelsior Dr., Suite 200
Madison, WI 53717



SEC/STATE (REV. 12/95)

FORM LLC-2 - FILING FEE: \$30.00
Approved by Secretary of State

State of California



SECRETARY OF STATE

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

DEC 09 2002



Secretary of State