

04-03-2003

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



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

Tab settings

102408261

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

1. Name of conveying party(ies):

Ameritas Life Insurance Corp. 5900 "O" Street Lincoln, NE 68510

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

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

3. Nature of conveyance:

- Assignment Merger Security Agreement Change of Name Other

Execution Date: 3-19-2003

2. Name and address of receiving party(ies)

Name: Safeguard Health Plans, Inc.

Internal Address: 95 Enterprise, Suite 100

Street Address:

City: Aliso Viejo State: CA Zip: 92656

- Individual(s) citizenship Association General Partnership Limited Partnership Corporation-State California 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

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

A. Trademark Application No.(s)

B. Trademark Registration No.(s) 2051995

Additional number(s) attached Yes No

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

Name: David M. Williams

Internal Address: Ameritas Life Insurance Corp.

Street Address: 5900 "O" Street

City: Lincoln State: NE Zip: 68510

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 3.41): \$ 40.00

- Enclosed Authorized to be charged to deposit account

8. Deposit account number:

(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.

David M. Williams

Name of Person Signing

Signature

3/19/03

Date

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

04/02/2003 LNUELLER 00000211 2051995

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

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40.00 OP

TRADEMARK REEL: 002704 FRAME: 0366

**RECORDATION FORM COVER SHEET**  
**Additional Information**

1. Ameritas Managed Dental Plan, Inc.  
Copper Tree Business Park  
151 Kalmus Drive, Suite B250  
Costa Mesa, California 92626-5988

Corporation - State

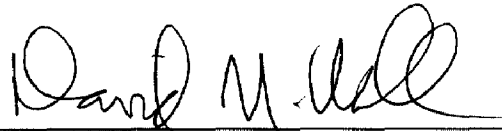
**ASSIGNMENT**

WHEREAS, Ameritas Life Insurance Corp., Lincoln, Nebraska 68510, and Ameritas Managed Dental Plan, Inc., Costa Mesa, California 92626-5988, has adopted, used and is using a mark which is registered in the United States Patent and Trademark Office, Registration No. 2051995, dated April 15, 1997; and

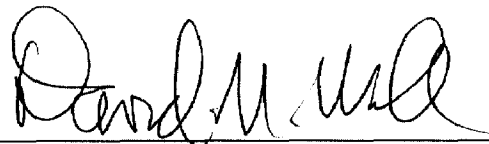
WHEREAS, Safeguard Health Plans, Inc., of 95 Enterprise, Suite 100, Aliso Viego, California 92656, is desirous of acquiring said mark and the registration thereof;

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, said Ameritas Life Insurance Corp. and Ameritas Managed Dental Plan, Inc. do hereby assign unto the said Safeguard Health Plans, Inc., all right, title and interest in and to the said mark, together with the good will of the business symbolized by the mark, and the above identified registration thereof.

Dated this 19<sup>th</sup> day of March, 2003.



David M. Williams,  
Attorney for Ameritas Life Insurance Corp.



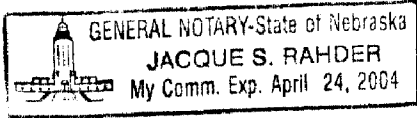
David M. Williams,  
Attorney for Ameritas Managed Dental Plan,  
Inc.

[Notaries on following page]

STATE OF NEBRASKA )  
 ) ss.  
COUNTY OF LANCASTER )

The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of March, 2003, by David M. Williams, attorney for Ameritas Life Insurance Corp., a Nebraska corporation, on behalf of the corporation.

WITNESS my hand and official seal.



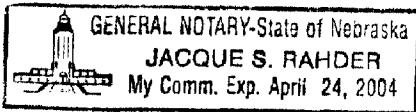
Jacquie S. Rahder  
Notary Public

My Commission Expires: 4-24-2004

STATE OF NEBRASKA )  
 ) ss.  
COUNTY OF LANCASTER )

The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of March, 2003, by David M. Williams, attorney for Ameritas Managed Dental Plan, Inc. a California corporation, on behalf of the corporation.

WITNESS my hand and official seal.

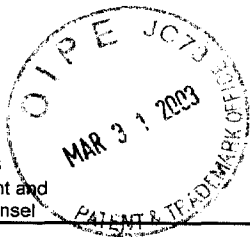


Jacquie S. Rahder  
Notary Public

My Commission Expires: 4-24-2004

David M. Williams  
Assistant Vice President and  
Associate General Counsel

(402) 467-7852 (Direct)  
(402) 467-7956 (Fax)  
E-mail dwilliams@ameritas.com



5900 "O" Street / Lincoln, NE / 68510  
P.O. Box 81889 / Lincoln, NE / 68501-1889  
(402) 467-1122

*JS*

March 28, 2003

**FEDERAL EXPRESS DELIVERY**

Director  
United States Patent & Trademark Office  
Box Assignment  
Washington, D.C. 20231

RE: Mark: Excel  
Serial No.: 74718935  
Registration No.: 2051995  
Owners: Ameritas Life Insurance Corp. & Ameritas Managed Dental Plan,  
Inc.

Dear Sir or Madam:

In regards to above Mark, enclosed for filing are the following:

1. Assignment;
2. Cover sheet; and
3. Check in the amount of \$40.00 for the recordation fee.

This Assignment conveys ownership of the above mark to Safeguard Health Plans, Inc. Please mark the Assignment with the reel and frame numbers and return it to me in enclosed postage paid envelope.

Thank you for your assistance in this matter. If you require additional information or have any questions, please feel free to contact me directly at (402) 467-7852.

Sincerely,

*David M. Williams*

David M. Williams  
Assistant Vice President and  
Associate General Counsel

Enclosures

cc: Steve Christophersen  
Jenn Larson

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**RECORDED: 03/31/2003**

**TRADEMARK  
REEL: 002704 FRAME: 0370**