

05-14-2003



102447019
TRADEMARK

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

J.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.

<p>1. Name of conveying party(ies) 5.12.03 Lippincott-Raven Medical, Ltd. 300 Delaware Avenue, Suite 1704 Wilmington, Delaware 19801</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-State <input checked="" type="checkbox"/> Other <u>Delaware Corporation</u></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)</p> <p>Name: <u>Lippincott Williams & Wilkins, Inc.</u> Internal Address: _____ Address: _____</p> <p>Street Address: <u>1111 Bethlehem Pike</u></p> <p>City: <u>Springhouse</u> State: <u>PA</u> Zip: <u>19477</u></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-State <u>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 (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input checked="" type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____</p> <p>Execution Date: <u>December 1, 2002</u></p>	

<p>4. Application number(s) or registration number(s):</p> <p>A. Trademark Application No.(s) N/A</p> <p>B. Trademark Registration No.(s) <u>163683, 589577, 938877, 1208316, 1248932, 1274174, 1301607, 1445119, 1475381</u></p> <p>Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Laura Genovese Miller</u> Internal Address: <u>Cozen O'Connor</u> <u>6th Floor</u> Street Address: <u>1900 Market Street</u> City: <u>Philadelphia</u> State <u>PA</u> Zip: <u>19103</u></p>	<p>6. Total number of applications and registrations involved: <u>9</u></p> <p>7. Total fee (37 CFR 3.41)..... <u>\$240.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: <u>50-1275</u> (Attach duplicate copy of this page if paying by deposit account)</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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.

Laura Genovese Miller Laura G. Miller May 6, 2003
Name of Person Signing Signature Date

Total number of pages involving cover sheet, attachments, and document: 4

OFFICE OF PUBLIC RECORDS
2003 MAY 12 AM 3:02
FINANCE SECTION

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

05/13/2003 GTOM11 00000056 501275 163683

01 FC:8521 40.00 CH
02 FC:8522 200.00 CH

TRADEMARK
REEL: 002732 FRAME: 0196

CERTIFICATE OF OWNERSHIP AND MERGER

MERGING

LIPPINCOTT-RAVEN MEDICAL, LTD.

INTO

LIPPINCOTT WILLIAMS & WILKINS, INC.

Lippincott Williams & Wilkins, Inc., a corporation organized and existing under the laws of Delaware,

DOES HEREBY CERTIFY:

FIRST: That this corporation was incorporated on the 17th day of February 1978, pursuant to the General Corporation Law of the State of Delaware.

SECOND: That this corporation owns all of the outstanding shares (of each class) of the stock of Lippincott-Raven Medical, Ltd. a corporation incorporated on the 12th day of August 1996, pursuant to the General Corporation Law of the State of Delaware.

THIRD: That this corporation, by the following resolutions of its Board of Directors, duly adopted by the unanimous written consent of its members, filed with the minutes of the Board on the 1st day of December 2002, determined to merge into itself said Lippincott-Raven Medical, Ltd.:

RESOLVED that the Corporation merge, and it hereby does merge into itself Lippincott-Raven Medical, Ltd. and assumes all of its obligations;

and

FURTHER RESOLVED that the merger shall be effective as of December 31, 2002;

and

FURTHER RESOLVED that the proper officer of this corporation be and he or she is hereby directed to make and execute a Certificate of Ownership and Merger setting forth a copy of the resolutions to merge said Lippincott-Raven Medical, Ltd. and assume its liabilities and obligations, and the date of adoption thereof, and to cause the same to be filed with the Secretary of State and to do all acts and things whatsoever, whether within or without the State of Delaware, which may be in anywise necessary or proper to effect said merger;

and

FOURTH: Anything herein or elsewhere to the contrary notwithstanding, this merger may be amended or terminated and abandoned by the Board of Directors at any time prior to the time that this merger being filed with the Secretary of State becomes effective.

IN WITNESS WHEREOF, said Lippincott Williams & Wilkins, Inc. has caused this Certificate to be signed by Dale C. Gordon, its Asst. Secretary, this 1st day of December 2002.

By 
Dale C. Gordon, Asst. Secretary

DE052 - 12/13/99 C T System Online

Delaware

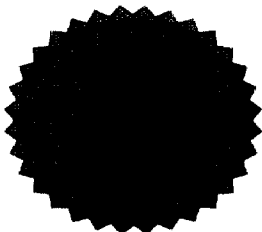
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF OWNERSHIP, WHICH MERGES:

"LIPPINCOTT-RAVEN MEDICAL, LTD.", A DELAWARE CORPORATION, WITH AND INTO "LIPPINCOTT WILLIAMS & WILKINS, INC." UNDER THE NAME OF "LIPPINCOTT WILLIAMS & WILKINS, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE TWENTIETH DAY OF DECEMBER, A.D. 2002, AT 4:30 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF OWNERSHIP IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2002.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2652646 8100M

AUTHENTICATION: 2298621

030158884

DATE: 03-10-03
TRADEMARK

RECORDED: 05/12/2003

REEL: 002732 FRAME: 0199