

Form PTO-1594  
1-31-92

U.S. Department of Commerce  
Patent and Trademark Office

# RECORDATION FORM COVER SHEET TRADEMARKS ONLY

Our Ref.: 3438-263

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

To the Commissioner for Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):  
 AMERSHAM PHARMACIA BIOTECH UK LIMITED  
 Amersham Place, Little Chalfont  
 Buckinghamshire, ENGLAND HP7 9NA

Individual(s)                       Association  
 General partnership               Limited Partnership  
 Corporation-Cty      United Kingdom  
 Other: \_\_\_\_\_

2. Name and address of receiving party(ies):  
 Name: AMERSHAM BIOSCIENCES UK LIMITED  
 Internal Address: \_\_\_\_\_  
 Street Address: Amersham Place, Little Chalfont

City: Buckinghamshire  
 State/Country: ENGLAND  
 Zip: HP7 9NA

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation-Cty      United Kingdom  
 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 Assignment                       Change of Name  
 Other: \_\_\_\_\_

Execution Date: January 24, 2002

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

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Trademark Application No.(s)  
 (1) 76/221,103  
 (2) \_\_\_\_\_  
 (3) \_\_\_\_\_

B. Trademark Registration No.(s)  
 (1) \_\_\_\_\_  
 (2) \_\_\_\_\_  
 (3) \_\_\_\_\_

Additional numbers attached?  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:  
 Name: Frank P. Presta  
 Internal Address: \_\_\_\_\_  
 Street Address: Nixon & Vanderhye P.C.  
1100 North Glebe Road  
8th Floor  
 City Arlington State: VA Zip: 22201

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 #14-1140

8. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our **Account No. 14-1140**.

DO NOT USE THIS SPACE

9. Statements 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.

Frank P. Presta  
Name of Person Signing

  
Signature

July 29, 2003  
Date

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

FPP:143  
700058406

TRADEMARK  
REEL: 002769 FRAME: 0770

CH \$40.00 141140 76221103

Docket No. : 3438-263

Trademark Application Serial No. 76/221,103

Assignment not required for trademark Change of Name