


RIGHT FAX 703-306-5995

Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)		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): Automated Prescription Systems, Inc. <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 type="checkbox"/> Other _____ Additional name(s) of conveying party(ies) attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			2. Name and address of receiving party(ies) Name: McKesson Automation Systems, Inc. Internal _____ Address: _____ Street Address: 320 Somerulos St. City: Baton Rouge State: LA Zip: 70802-6129 <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 _____ <input type="checkbox"/> Other _____ <small>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)</small> <small>Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</small>		
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: 07/18/2001					
4. Application number(s) or registration number(s): A. Trademark Application No.(s) B. Trademark Registration No.(s) 2207369 Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: BRETT A. NORTH Name: Garvey, Smith, Nehrbass & Doody, L.L.C. Internal Address: _____ Fax: (504) 835-2070 Telephone: (504) 835-2000 Street Address: Three Lakeway Center, Suite 3290 3838 North Causeway Boulevard City: Metairie State: LA Zip: 70002			6. Total number of applications and registrations involved: 1 7. Total fee (37 CFR 3.41) \$ 40 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: 50-0694 <small>(Attach duplicate copy of this page if paying by deposit account)</small>		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>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.</i> Brett A. North Name of Person Signing			 Signature January 2, 2004 Date Total number of pages including cover sheet, attachments, and document: 3		

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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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CONTINUATION OF PTO-1594

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Additional Name of Conveying Party:

McKesson Automated Prescription Systems, Inc.

**Louisiana Secretary of State
Unofficial Detail Record**

Charter/Organization ID: 24304390D

Name: MCKESSON AUTOMATION SYSTEMS INC.

Prior Name: MCKESSON AUTOMATED PRESCRIPTION SYSTEMS, INC. (7/18/2001)

Prior Name: AUTOMATED PRESCRIPTION SYSTEMS, INC. (10/27/1998)

Prior Name: AUTOMATED PRESCRIPTIONS SYSTEMS, INC. (7/24/1970)

Prior Name: BEST SALES COMPANY, INC. (4/29/1970)

Type Entity: Business Corporation

Status: Active

Annual Report Status: In Good Standing

Domicile Address: 320 SOMERULOS ST., BATON ROUGE, LA 70802-6129

Incorporated: 08/07/1958

Registered Agent (Appointed 3/14/2001): CORPORATION SERVICE COMPANY, 320 SOMERULOS ST., BATON ROUGE, LA 70802-6129

President: MARK SAKANIWA

Exec Vice President: RICHARD R. LUNAK

Vice President: KRISTINA VEACO

Secretary: KRISTINA VEACO

Director: KRISTINA VEACO

Additional officers may exist on document

Amendments on File

- NAME CHANGE (07/18/2001)
- DOMICLE, AGENT CHG OR RESIGN OF AGT (03/14/2001)
- NAME CHANGE (10/27/1998)
- DOMICLE, AGENT CHG OR RESIGN OF AGT (10/27/1998)
- RESTATED ARTICLES (09/23/1998)
- MERGER (09/23/1998)
- NAME CHANGE (07/24/1970)
- NAME CHANGE (04/29/1970)

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