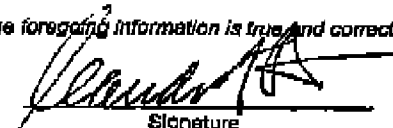


Form PTO-1584 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) Tab settings $\rightarrow \rightarrow \rightarrow$		<b>REGISTRATION FORM COVER SHEET</b> <b>TRADEMARKS ONLY</b>		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
<b>1. Name of conveying party(ies):</b>  PFIZER IRELAND PHARMACEUTICALS  <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation-State <input checked="" type="checkbox"/> Other <u>unlimited company</u>			<b>2. Name and address of receiving party(ies)</b> Name: <u>PFIZER OVERSEAS PHARMACEUTICALS</u> <del>XXXXXXXX</del> <del>XXXXXXXX</del> <u>POTTERY ROAD</u>  <del>XXXXXXXXXX</del> <u>DUN LAOGHAIRE CO.</u>  <del>NY</del> <u>DUBLIN</u> <del>state</del> <u>IRELAND</u> <del>zip</del>  <input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input type="checkbox"/> Corporation-State _____ <input checked="" type="checkbox"/> Other <u>unlimited company</u> <small>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No          (Designations must be a separate document from assignment)          Additional name(s) &amp; address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</small>		
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>3. Nature of conveyance:</b> <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: <u>9 JANUARY 2004</u>					
<b>4. Application number(s) or registration number(s):</b> A. Trademark Application No.(s)		B. Trademark Registration No.(s) <u>2074561</u>			
Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>5. Name and address of party to whom correspondence concerning document should be mailed:</b> Name: <u>Claudia A. Smith</u> Internal Address: <u>Hale and Dorr LLP</u>  Street Address: <u>300 Park Avenue</u>  City: <u>New York</u> State: <u>NY</u> Zip: <u>10022</u>			<b>6. Total number of applications and registrations involved:</b> ..... <span style="border: 1px solid black; padding: 2px;">1</span>		
			<b>7. Total fee (37 CFR 3.41)</b> ..... \$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account		
			<b>8. Deposit account number:</b> <u>08-0219</u> <small>(Attach duplicate copy of this page if paying by deposit account)</small>		
<b>DO NOT USE THIS SPACE</b>					
<b>9. Statement and signature.</b> <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> <u>CLAUDIA A. SMITH</u> Name of Person Signing					
			 Signature		
			<u>5 April 2004</u> Date		
Total number of pages including cover sheet, attachments, and document <span style="border: 1px solid black; padding: 2px;">3</span>					

Mail documents to be recorded with required cover sheet information to:  
 Commissioner of Patent & Trademarks, Box Assignments  
 Washington, D.C. 20251

CH \$40.00 080219 2074561

Number 79355

# Certificate of Incorporation on change of name

I hereby certify that

**PFIZER IRELAND PHARMACEUTICALS**

having, by a Special Resolution of the Company,  
and with the approval of the Minister for Enterprise,  
Trade and Employment, changed its name, is now  
incorporated under the name

**PFIZER OVERSEAS PHARMACEUTICALS**

and I have entered such name on the Register accordingly,

Given under my hand at Dublin, this  
Friday, the 9th day of January, 2004

  
for Registrar of Companies

04-06-04 01:10pm From-Pfizer Inc.

+616949881011487216 T-552 P.005/008 N=228

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Registration of Pfizer Ireland Pharmaceuticals (by change of name from Warner Lambert Export Limited)

Registration No.: 2,074,561

Dated: June 24, 1997

Mark: LIPITOR

Mail Stop Assignment Recordation Services  
Director of the U.S. Patent and Trademark Office  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

DESIGNATION OF DOMESTIC REPRESENTATIVE

Sir:

Hale and Dorr LLP, 300 Park Avenue, New York, New York 10022, is hereby designated domestic representative in connection with the above-referenced trademark registration upon whom all notices or process in proceedings affecting this registration may be served.

Respectfully submitted,

PFIZER IRELAND PHARMACEUTICALS



Name: Terence Lamba  
Title: Member of the Management Committee  
Vice President / Area Team Leader  
Ireland / Singapore

Dated: April 5, 2004