

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);

MEDAMICUS, INC.

Individual(s) Association

General Partnership Limited Partnership

Corporation-State – MINNESOTA

Other _____

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

2. Name and address of receiving party(ies)

Name: ENPATH MEDICAL, INC.

Street Address: 15301 Highway 55 West

City: Plymouth State MN Zip 55447

Individual(s) citizenship _____

Association _____

General Partnership _____

Limited Partnership _____

Corporation-State Minnesota

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 Agreement Change of Name

Other _____

Execution Date: January 20, 2004

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

A. Trademark Application No.(s)

78/336,483 78/336,928

Additional number(s) attached Yes No

B. Trademark Registration No.(s)

2,789,721

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

Name: LINDQUIST & VENNUM P.L.L.P.

Internal Address: CONNIE HEIKKILA

Street Address: 4200 IDS CENTER

City: MINNEAPOLIS State MN Zip: 55448

6. Total number of applications and registrations involved: 3

7. Total fee (37 CFR 3.41) \$ 90.00

Enclosed

Authorized to be charged to deposit account

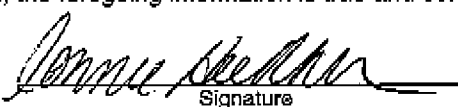
8. Deposit account number: 50-0837

(Attach duplicate 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.

CONNIE R. HEIKKILA, PARALEGAL  May 4, 2004

Name of Person Signing Signature Date

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

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

CH \$90.00 600837 78336483

3Y-537

State of Minnesota **COPY**

SECRETARY OF STATE

Certificate of Merger

I, Mary Kiffmeyer, Secretary of State of Minnesota, certify that: the documents required to effectuate a merger between the entities listed below and designating the surviving entity have been filed in this office on the date noted on this certificate; and the qualification of any non-surviving entity to do business in Minnesota is terminated on the effective date of this merger.

Merger Filed Pursuant to Minnesota Statutes, Chapter: 302A

State of Formation and Names of Merging Entities:

MN: MEDAMICUS, INC.

MN: ENPATH MEDICAL, INC.

State of Formation and Name of Surviving Entity:

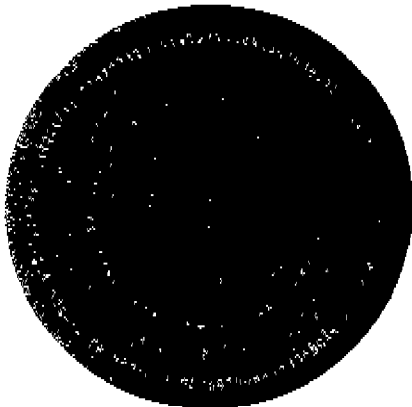
MN: MEDAMICUS, INC.

Effective Date of Merger: 2/2/2004---12:01 A.M.

Name of Surviving Entity After Effective Date of Merger:

ENPATH MEDICAL, INC.

This certificate has been issued on: 1/20/2004



Mary Kiffmeyer
Secretary of State.