

FORM PTO 1594

RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

TRADEMARKS ONLY

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

InfoCure Systems, Inc.

- Individual(s)
- General Partnership
- Corporation-State of Georgia
- Other:
- Association
- Limited Partnership

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

2. Name and address of receiving party(ies):

Name: InfoCure Corporation
 Internal Address: _____
 Street Address: 1765 The Exchange, Suite 450
 City: Atlanta
 State: Georgia
 Zip Code: 30339

- Individual(s) citizenship:
- Association:
- General Partnership:
- Limited Partnership:

Corporation - State of Delaware

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 names(s) & address(es) attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other
- Merger
- Change of Name

Execution Date: February 22, 2001
Effective Date: March 5, 2001

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

A. Trademark Application No(s).

B. Trademark Registration No(s).
2,166,869

Additional numbers attached? Yes No

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

Name: Barry R. Lipsitz

Internal Address: _____

Street Address: 755 Main Street
Building No. 8

City: Monroe State: CT ZIP: 06468

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 50-0825.

8. Deposit account number:

The Commissioner is hereby authorized to charge any deficiency in the payment of the required fee(s) or credit any overpayment to Deposit Account No. 50-0625.

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.

Barry R. Lipsitz

June 10, 2004

Name of Person Signing

Signature

Date

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

3

CH \$40.00 500625 2166869

JAN-09-2003 13:52
Mar-15-2001 08:10:01 From-

VITALWORKS

203 894 1801 P.02

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 010640532
CONTROL NUMBER : K742839
EFFECTIVE DATE : 03/05/2001
REFERENCE : 0077
PRINT DATE : 03/05/2001
FORM NUMBER : 411

MORRIS, MANNING & MARTIN
DONNA M. KENDRICK
3343 PEACHTREE RD, NE, STE 1600
ATLANTA GA 30326

CERTIFICATE OF MERGER

I, Cathy Cox, the Secretary of State of the Georgia, do hereby issue this certificate pursuant to Title 14 of the Official Code of Georgia annotated certifying that articles or a certificate of merger and fees have been filed regarding the merger of the below entities, effective as of the date shown above. Attached is a true and correct copy of the said filing.

Surviving Entity:
INFOCURE CORPORATION, A DELAWARE CORPORATION

Nonsurviving Entity/Entities:
INFOCURE SYSTEMS, INC., A GEORGIA CORPORATION



Cathy Cox
CATHY COX
SECRETARY OF STATE

**CERTIFICATE OF MERGER OF
INFOCURE SYSTEMS, INC.
AND
INFOCURE CORPORATION**

I.

The names and states of incorporation of the merging corporations are InfoCure Corporation, a Delaware corporation, the surviving corporation, and InfoCure Systems, Inc., a Georgia corporation, the merged corporation.

II.

The executed Plan of Merger is on file at the principal place of business of InfoCure Corporation which is located at 1765 The Exchange, Suite 450, Atlanta, Georgia 30339.

III.

A copy of the Plan of Merger will be furnished by InfoCure Corporation, on request and without cost, to any shareholder of any corporation that is a party to the merger.

IV.

Shareholder approval of the merger was not required.

V.

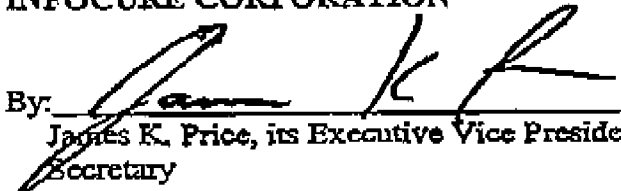
A request for publication of a notice of filing this Certificate of Merger and payment therefor will be made as required by O.C.G.A. § 14-2-1105.1(b).

Date: Feb. 22, 2001

INFOCURE SYSTEMS, INC.

By: 
James K. Price, its Executive Vice President and Secretary

INFOCURE CORPORATION

By: 
James K. Price, its Executive Vice President and Secretary

SECRETARY OF STATE
01 MAR -5 PM 12:46
CORPORATIONS DIVISION

Cert of Merger-GA