

01-21-2004

PTO-1594

(Rev. 10/02)

OMB No. 0651-0027 (exp. 6/30/2005)

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102650493

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):

FLEET NATIONAL BANK

- ☐ Individual(s) ☐ Association
☐ General Partnership ☐ Limited Partnership
☒ Corporation-State
☐ Other _____

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

3. Nature of conveyance:

- ☐ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☒ Other Security Release

Execution Date: 04-22-03

2. Name and address of receiving party(ies)

Name: Meridian Medical Technologies, Inc.

Internal

Address: _____

Street Address: 10240 Old Columbia Rd.City: Columbia State: MD Zip: 21046

- ☐ Individual(s) citizenship _____
☐ Association _____
☐ General Partnership _____
☐ Limited Partnership _____
☒ Corporation-State Maryland
☐ 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

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

A. Trademark Application No.(s) _____

B. Trademark Registration No.(s) _____

600077Additional number(s) attached ☐ Yes ☒ No

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

Name: Glenn T. Barrett

Internal Address: _____

Street Address: Pillsbury Winthrop LLPP.O. Box 10500City: McLean State: VA Zip: 22102

6. Total number of applications and registrations involved: _____

127. Total fee (37 CFR 3.41).....\$ 480

- ☐ Enclosed
☒ Authorized to be charged to deposit account

8. Deposit account number:

03-3975

DO NOT USE THIS SPACE

9. Signature.

Glenn T. Barrett

Name of Person Signing

Signature

January 14, 2004

Date

Total number of pages including cover sheet, attachments, and document: 6

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

01/20/2004 ECOOPER 00000223 033975 600077

01 FC:0521 40.00 DA
02 FC:0522 275.00 DA

TRADEMARK
REEL: 002898 FRAME: 0963

4.5 Continued APPL. NO.(S) OR REG. NO.(S).

A. TM. APP. NO.(S) series code/serial no	M#	MARK	B. REGISTRATION NO(S)	MARK
			2157050	BINAJET
			1214758	CARDIO BEEPER
			1040829	COMBO PEN
			1481501	CYTOGUARD
			1201906	INFANTRODE
			914015	LIDOPEN AUTO-INJECTOR
			2512908	PRIME ECG
			1207805	SOLUJET
			1288834	SPEEDFIT
			1760636	STI
			1701601	SURVIVAL TECHNOLOGY INC.

6-0001363753-18

REVOLVING CREDIT NOTE

\$15,000,000

January 31, 2002

FOR VALUE RECEIVED, the undersigned, **MERIDIAN MEDICAL TECHNOLOGIES, INC. ("Borrower")**, promises to pay to the order of **FLEET NATIONAL BANK ("Lender")**, at the office of the Lender, located at 7111 Valley Green Road, Fort Washington, PA, with respect to Domestic Revolving Credit Loans, in lawful money of the United States of America and, with respect to Foreign Currency Revolving Credit Loans, in the applicable Foreign Lending Currency, and in immediate available funds, the principal amount of Fifteen Million Dollars (\$15,000,000) or so much of such principal amount as shall be outstanding and unpaid on the Revolving Credit Maturity Date.

This Revolving Credit Note (the **"Note"**) is the Revolving Credit Note referred to in, and is issued pursuant to, that certain Loan and Security Agreement between Borrower and Lender dated the date hereof (hereinafter, as amended from time to time, the **"Loan Agreement"**), and is entitled to all of the benefits and security of the Loan Agreement. All of the terms, covenants and conditions of the Loan Agreement and the Security Documents are hereby made a part of this Note and are deemed incorporated herein in full. All capitalized terms used herein, unless otherwise specifically defined in this Note, shall have the meanings ascribed to them in the Loan Agreement.

The rate of interest in effect hereunder shall be calculated with reference to the Base Rate or LIBOR, as applicable, as more specifically provided in the Loan Agreement. The interest due shall be computed in the manner provided in the Loan Agreement.

Except as otherwise expressly provided in the Loan Agreement, if any payment on this Note becomes due and payable on a day other than a Business Day, the maturity there of shall be extended to the next succeeding Business Day, and with respect to payments of principal, interest thereon shall be payable at the then applicable rate during such extension. Notwithstanding the foregoing, if any portion of the Revolving Credit Loans evidenced by this promissory note constitutes a LIBOR Advance, and an extension of the maturity of any payment hereon would cause the maturity thereof to occur during the next calendar month, then such payment shall mature on the next preceding Business Day.

Borrower may terminate the Loan Agreement and, in connection with such termination, prepay this Note in the manner provided in **Section 4** of the Loan Agreement.

Upon the occurrence and continuation of any one or more of the Events of Default specified in the Loan Agreement which have not been cured by Borrower or waived by Lender, Lender may declare all Obligations evidenced hereby to be immediately due and payable (except with respect to any Event of Default set forth in **subsection 10.1.10** of the Loan Agreement, in which case all Obligations evidenced hereby shall automatically become immediately due and payable without the necessity of any notice or other demand) without presentment, demand, protest or any other action or obligation of the Lender.

Time is of the essence of this Note. Borrower hereby waives presentment, demand, protest and notice of any kind. No failure to exercise, and no delay in exercising, any rights hereunder on the part of the holder hereof shall operate as a waiver of such rights.

Wherever possible, each provision of this Note shall be interpreted in such manner as to be effective and valid under applicable law, but if any provision of this Note shall be prohibited or invalid under applicable law, such provision shall be ineffective to the extent of such prohibition or invalidity without invalidating the remainder of such provision or remaining provisions of this Note. No delay or failure on the part of Lender in the exercise of any right or remedy hereunder shall operate as a waiver thereof, nor as an acquiescence in any default, nor shall any single or partial exercise by Lender of any right or remedy preclude any other right or remedy. Lender, at its option, may enforce its rights against any collateral securing this Note without enforcing its rights against Borrower, any guarantor of the indebtedness evidenced hereby or any other property or indebtedness due or to become due to Borrower. Borrower agrees that, without releasing or impairing Borrower's liability hereunder, Lender may at any time release, surrender, substitute or exchange any collateral securing this Note and may at any time release any party primarily or secondarily liable for the indebtedness evidenced by this Note.

The validity, interpretation and enforcement of this promissory note shall be governed by the internal laws of the state of Pennsylvania without giving effect to the conflict of laws principles thereof.

MERIDIAN MEDICAL TECHNOLOGIES, INC.

By: 

Name: Dennis P. O'Brien

Title: Vice President, Finance and Chief Financial
Officer

PAID
FLEET NATIONAL BANK
LOAN DOCUMENTATION

Marks: Trademarks and/or Service Marks

<u>Mark</u>	<u>Registration No.</u>	<u>Renewal Date</u>
Atro Pen	600077	12-28-2004
Binaject	2157050	05-12-2008
Cardio Beeper	1214758	11-02-2002
Combo Pen	1040829	06-08-2006
Cytoguard	1481501	03-22-2008
Infantrade	1201906	07-20-2002
Lidopen Auto-Injector	914015	06-08-2001
Prime ECG	2512908	11-27-2011
Soluject	1207805	09-14-2002
Speedfit	1288834	08-07-2004
STI	1760636	03-23-2003
Survival Technology Inc.	1701601	07-21-2002

UCC FINANCING STATEMENT AMENDMENT

A. Name and Phone of Contact at Filer <i>[optional]</i>
B. Send Acknowledgment to: <i>(name and address)</i>
Meridian Medical Technologies Inc. 10240 Old Columbia Road Columbia, MD 21046

The Above Space is for Filing Office Only

1a. Initial Financing Statement File # **2049444 7 2/1/02**

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the Real Estate Records.

2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ☐ **ASSIGNMENT** (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects ☐ Debtor or ☐ Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

☐ **CHANGE** name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ☐ **DELETE** name: Give record name to be deleted in item 6a or 6b. ☐ **ADD** name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

OR	6a. Organization's Name: Meridian Medical Technologies Inc.			
	6b. Individual's Last Name	First Name	Middle Name	Suffix

7. CHANGED (NEW) OR ADDED INFORMATION:

OR	8. 7a. Organization's Name				
	7b. Individual's Last Name	First Name	Middle Name	Suffix	
7c. Mailing Address		City	State	Postal Code	Country
7d. Tax ID#: SSN or EIN	Add'l Info Re Organization Debtor	7e. Type of Organization	7f. Jurisdiction of Organization	7g. Organizational ID #, if any _____ None	

8. AMENDMENT (Collateral /Change): Check only one box.

Describe collateral ☐ released or ☐ added, or give entire ☐ restated collateral description, or described collateral ☐ assigned.

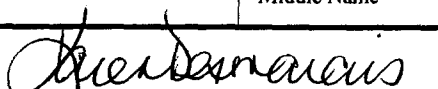
9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment

OR	9a. Organization's Name Fleet National Bank		04/22/2003	
	9b. Individual's Last Name	First Name	Middle Name	Suffix

10. OPTIONAL FILER REFERENCE DATA

16-0001363753

Secretary of State, MD


Karen Desmarais, A.V.P.

FILING OFFICE COPY- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

RECORDED: 01/14/2004

TRADEMARK
REEL: 002898 FRAME: 0968