

Form PTO-1594 (Rev. 06/04)
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<p>R</p> <p>102764016</p> <p>To the Director of the U. S. Patent and Trademark Office: Please return documents or the new address(es) below.</p>	
<p>1. Name of conveying party(ies)/Execution Date(s): PNC Bank, National Association Mailstop P1-POPP-BL-7 249 Fifth Ave., One PNC Plaza Pittsburgh, PA 15222</p> <p><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>National Association</u></p> <p>Citizenship (see guidelines) _____</p> <p>Execution Date(s) <u>07/06/2004</u></p> <p>Additional names of conveying parties attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies) Additional names, addresses, or citizenship attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Name: <u>Xanodyne Pharmacal, Inc.</u> Internal Address: _____ Street Address: <u>7300 Turfway Road, Suite 300</u> City: <u>Florence</u> State: <u>Kentucky</u> Country: <u>USA</u> Zip: <u>41042</u></p> <p><input type="checkbox"/> Association Citizenship _____ <input type="checkbox"/> General Partnership Citizenship _____ <input type="checkbox"/> Limited Partnership Citizenship _____ <input type="checkbox"/> Corporation Citizenship _____ <input checked="" type="checkbox"/> Other <u>Inc.</u> Citizenship _____</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment)</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other <u>RELEASE</u></p>	
<p>4. Application number(s) or registration number(s) and Identification or description of the Trademark.</p> <p>A. Trademark Application No.(s) _____ B. Trademark Registration No.(s) <u>72124870</u></p> <p>Additional sheet(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):</p>	
<p>5. Name & address of party to whom correspondence concerning document should be mailed: Name: <u>PNC Bank, National Association</u> Internal Address: <u>Mailstop P1-POPP-BL-7</u> Street Address: <u>249 Fifth Ave. One PNC Plaza</u> City: <u>Pittsburgh</u> State: <u>PA</u> Zip: <u>15222</u> Phone Number: <u>(412) 768-7197</u> Fax Number: <u>(412) 705-2132</u> Email Address: _____</p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ <u>40.00</u></p> <p><input type="checkbox"/> Authorized to be charged by credit card <input type="checkbox"/> Authorized to be charged to deposit account <input checked="" type="checkbox"/> Enclosed <u>Fee Pd.</u></p> <p>8. Payment Information:</p> <p>a. Credit Card Last 4 Numbers _____ Expiration Date _____</p> <p>b. Deposit Account Number _____ Authorized User Name _____</p>
<p>9. Signature: <u>Theresa A. Morrow</u> <u>07/06/2004</u> Signature Date</p> <p><u>Theresa A. Morrow</u> Name of Person Signing</p> <p>Total number of pages including cover sheet, attachments, and document: 2</p>	

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
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Release Filing No: 72124870

July 20, 2004

Gentlemen:

Enclosed please find Xanodyne Pharmacal, Inc. for filing in your office in regard to the above- referenced
lien filing. This Xanodyne Pharmacal, Inc. represents the release of the lien of PNC Bank, National
Association against the trademark filed with your office at the above-referenced filing.

Very truly yours,


Theresa A. Morrow

Enclosure