

Form PTO-1594 (Rev. 06/04)
 OMB Collection 0651-0027 (exp. 6/30/2005)

U.S. DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office

**RECORDATION FORM COVER SHEET
 TRADEMARKS ONLY**

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):
 INDEPENDENT PHYSICAL
 THERAPY
 3525-M KEITH STREET, N.W.,
 CLEVELAND, TN 37312

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

Citizenship (see guidelines) Tennessee

Execution Date(s) August 27, 2004

Additional names of conveying parties attached? Yes No

2. Name and address of receiving party(ies) Yes
 Additional names, addresses, or citizenship attached? No

Name: Benchmark Rehabilitation Partners

Internal Address: _____

Street Address: 8823 Production Lane

City: Ooltewah

State: TN

Country: USA Zip: 37363

Association Citizenship _____
 General Partnership Citizenship _____
 Limited Partnership Citizenship _____
 Corporation Citizenship _____
 Other LLC Citizenship USA

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)

3. Nature of conveyance:

Assignment Merger
 Security Agreement Change of Name
 Other _____

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s) 76205043

B. Trademark Registration No.(s) _____

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

BENCHMARK

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

Name: Sonia V. Heuer

Internal Address: Proskauer Rose LLP

Street Address: 1585 Broadway

City: New York

State: New York Zip: 10036-8299

Phone Number: 1-212-969-3000

Fax Number: 1-212-969-2900

Email Address: sheuer@proskauer.com

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00

Authorized to be charged by credit card
 Authorized to be charged to deposit account
 Enclosed

8. Payment information:

a. Credit Card Last 4 Numbers _____
 Expiration Date _____

b. Deposit Account Number 16-2500
 Authorized User Name Paine (7670)

9. Signature:

Signature _____ Date _____

Sonia V. Heuer

Name of Person Signing _____

Total number of pages including cover sheet, attachments, and document: 1

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
 Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

CH \$40.00 162500 76205043

DOMAIN NAME ASSIGNMENT

WHEREAS, Independent Physical Therapy, GP, a Tennessee general partnership, having a principal place of business at 8823 Production Lane, Ooltewah, Tennessee 37363, owns the domain name registration listed on the attached Exhibit A.

WHEREAS, Benchmark Rehabilitation Partners, LLC, a Delaware limited liability company, having a principal place of business at 8823 Production Lane, Ooltewah, Tennessee 37363, is desirous of acquiring an interest in the domain name registration listed on the attached Exhibit A;

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, Independent Physical Therapy, GP has sold, assigned and transferred, and by this presents to sell, assign and transfer unto Benchmark Rehabilitation Partners, LLC, all rights, title and interests in and to said domain name and the registration thereof. Further, Independent Physical Therapy, GP will sign any and all papers, and do whatever is reasonably necessary to complete the process of transferring to Benchmark Rehabilitation Partners, LLC the domain name registration listed on the attached Exhibit A.

IN TESTIMONY WHEREOF, Independent Physical Therapy, GP has caused this agreement to be signed and delivered to Benchmark Rehabilitation Partners, LLC this 27th day of August 2004.

INDEPENDENT PHYSICAL THERAPY, GP

By: [Signature]
Harvey J. Hillyer, Partner

By: [Signature]
Donavon T. Howe, Partner

By: [Signature]
Yolanda Londis, Partner

ACKNOWLEDGED AND AGREED:

[Signature]
Jeffrey Londis