TRADEMARK ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Xomed Surgical Products, Inc.		11/05/1999	CORPORATION: DELAWARE

RECEIVING PARTY DATA

Name:	Medtronic Xomed Surgical Products, Inc.	
Street Address:	6743 Southpoint Drive North	
City:	Jacksonville	
State/Country:	FLORIDA	
Postal Code:	32216	
Entity Type:	CORPORATION: DELAWARE	

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark
Registration Number:	1312193	POLYCEL
Registration Number:	1001002	OPHTHO-BURR

CORRESPONDENCE DATA

Fax Number: (763)505-2530

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

7635052526 Phone:

cindy.l.evenson@medtronic.com Email:

Correspondent Name: Cindy Evenson

Address Line 1: 710 Medtronic Parkway

Address Line 2: LC 340

Address Line 4: Minneapolis, MINNESOTA 55432-5604

NAME OF SUBMITTER:	Cindy L. Evenson
Signature:	/Cindy L. Evenson/
Date:	01/03/2005

REEL: 003000 FRAME: 0629

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Total Attachments: 1 source=xomed surgical name change#page1.tif

TRADEMARK
REEL: 003000 FRAME: 0630

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"MXS MERGER CORP.", A DELAWARE CORPORATION,

WITH AND INTO "XOMED SURGICAL PRODUCTS, INC." UNDER THE NAME OF "MEDTRONIC XOMED SURGICAL PRODUCTS, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE FIFTH DAY OF NOVEMBER, A.D. 1999, AT 12:15 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

AUTHENTICATION: 0066502

DATE:

11-05-99

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991471632

RECORDED: 01/03/2005

TRADEMARK REEL: 003000 FRAME: 0631