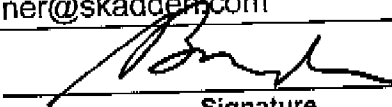


Form PTO-1594 (rev 06/04)		<b>RECORDATION FORM COVER SHEET TRADEMARKS ONLY</b>		U. S. Department of Commerce Patent and Trademark Office	
To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below:					
<b>1. Name of conveying party(ies)/Execution Date(s):</b>  <b>GynoPharma Inc.</b>  <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Other  Citizenship <u>Delaware</u>  Execution Date(s) <u>December 31, 2004</u> Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>2. Name and Address of receiving party(ies)</b> Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Name: <u>FEI Women's Health LLC</u>  Internal Address: <u>Attn: Chief Financial Officer</u> Street Address: <u>825 Wurlitzer Drive</u>  City: <u>North Tonawanda</u> State: <u>NY</u> Country: _____ Zip: <u>14120</u> <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>Limited Liability Company</u> Citizenship <u>Delaware</u> <small>If assignee is not domiciled in the United States, a domestic representative designation is attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No.</small>			
<b>3. Nature of conveyance:</b> <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Government Interest Assignment <input type="checkbox"/> Other _____		<b>4. Application number(s) or registration number(s):</b> A. Trademark Application No(s).          B. Trademark Registration No(s).          <div style="text-align: center; font-size: 24px;">1505716</div>			
<b>5. Name and address of party to whom correspondence concerning document should be mailed:</b>  Bruce J. Goldner Esq. SKADDEN, ARPS, SLATE, MEAGHER & FLOM LLP Four Times Square New York, New York 10036 Tel: (212) 735-3000 Fax: (212) 735-2000 bgoldner@skadden.com		<b>6. Total number of applications and registrations involved:</b> <u>1</u>		<b>7. Total fee (37 CFR 1.21(h) and 3.41) \$40</b>  <input checked="" type="checkbox"/> All fees and any deficiencies are authorized to be charged to Deposit Account (Our Ref. <u>074650/2</u> )	
<b>9. Signature.</b>  Signature Bruce J. Goldner Name of Person Signing		<b>8. Payment Information</b> Deposit Account No. <u>19-2385</u> Authorized user Name: <u>Michael McGuire</u>		January 7, 2005 Date  Total number of pages including cover sheet, and documents: <u>3</u>	

CH \$40.00 192385 1505716

**Assignment of Marks**

WHEREAS, GynoPharma Inc., a Delaware corporation ("Assignor"), has adopted, used and is the current owner of the trademarks and service marks listed on Exhibit A hereto (the "Marks"), which are registered or pending with the United States Patent and Trademark Office under the registration or applications numbers listed on Exhibit A.

WHEREAS, FEI Women's Health LLC (formerly known as FEI Acquisition LLC), a Delaware limited liability company ("Assignee"), desires to acquire all of Assignor's right, title and interest in and to the Marks in the United States.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor hereby assigns to Assignee all right, title and interest in and to the Marks in the United States, together with the goodwill symbolized by the use of the Marks, and together with all claims for damages by reason of the infringement thereof, with the right to sue for, and collect the same for its own use and benefit, and for the use and benefit of its successors, assigns and legal representatives.

Signed as of this 3<sup>rd</sup> day of January, 2003 and effective as of the 31<sup>st</sup> day of December, 2004.

GYNOPHARMA INC.

By: Seth H Z Fischer  
Name: Seth H. Z. Fischer  
Title: President

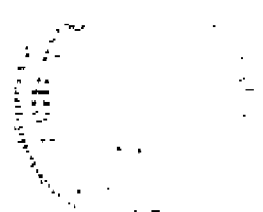
**Acknowledgement by Notary Public**

State of New Jersey  
County of Camden

On this 25 day of April, 2003, before me, the undersigned Notary Public, personally appeared Seth H. Z. Fischer, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same.

Seal:

Signature: Cheryl A. Wiczorek  
Name: Cheryl A. Wiczorek, Notary Public



**EXHIBIT A**

**Marks**

**1. Registrations/Applications**

Mark	U.S. Application No./ Registration No.
PARAGARD	1,505,716

**2. Common Law Marks**

