

VIA FACSIMILE - 703-306-5995

Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)	RECORDATION FORM COVER SHEET TRADEMARKS ONLY	U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office Our Ref.: 2818-103
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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): Mendes s.u.r.l.</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>limited liability company of Italy</u></p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies): Name: <u>VSL Pharmaceuticals, Inc.</u> Internal Address: _____ Street Address: <u>800 South Frederick Avenue</u> City: <u>Gaithersburg</u> State: <u>MD</u> Zip: <u>20877</u> Country: <u>USA</u></p> <p><input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation-State <u>Delaware</u> <input type="checkbox"/> Other _____</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</p> <p>Designations must be a separate document from Assignment) Additional name/s & address/es attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Assignment <input type="checkbox"/> Change of Name <input type="checkbox"/> Other: _____</p> <p>Execution Date: <u>January 28, 2005</u></p>	

<p>4. Application number(s) or registration number(s):</p> <p>A. Trademark Application No.(s) (1) _____ (2) _____ (3) _____</p> <p style="text-align: right;">Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>B. Trademark Registration No.(s) (1) <u>2,814,427 - OXADROP</u> (2) _____ (3) _____</p>
<p>5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Donna J. Bunton</u> Internal Address: _____ Street Address: <u>Nixon & Vanderhye P.C.</u> <u>1100 North Glebe Road</u> <u>8th Floor</u> City <u>Arlington</u> State: <u>VA</u> Zip: <u>22201</u></p>	<p>6. Total number of applications and registrations involved: <u>1</u></p> <p>7. Total fee (37 CFR 3.41) \$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account #14-1140</p> <p>8. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.</p>

DO NOT USE THIS SPACE

9. Signature.

<u>Donna J. Bunton</u> Name of Person Signing	 Signature	<u>March 18, 2005</u> Date
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Total number of pages including cover sheet, attachments and document: 3

DJB:pav

Mail documents to be recorded with required cover sheet information to:
 Commissioner of Patents & Trademarks, Box Assignments
 Washington, D.C. 20231
 Fax: 703-306-5995

CH \$40.00 141140 2814427

ASSIGNMENT


WHEREAS, MENDES s.u.r.l., a limited liability company of Italy, having its principal place of business at Via Nuoro, 12 - 00040 Ardea RM, Italy (hereinafter referred to as "Assignor"), has adopted and is the owner of the trademark OXADROP for *nutraceuticals for use as dietary supplements to treat and prevent hyperoxaluria*, the goodwill symbolized thereby and United States Registration No. 2,814,427 thereof;

WHEREAS, VSL Pharmaceuticals, Inc., a corporation of Delaware having its principal place of business at 800 South Frederick Avenue, Gaithersburg, Maryland 20877 (hereinafter referred to as "Assignee"), is desirous of acquiring all of Assignor's rights, title and interest in and to the trademark OXADROP, the goodwill symbolized thereby and United States Registration No. 2,814,427 thereof;

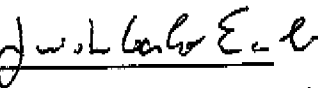
NOW, THEREFORE, for and in consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor hereby sells, assigns, transfers and conveys to Assignee all right, title and interest in and to the trademark OXADROP, together with the goodwill of the business symbolized by said mark and the United States registration thereof.

The U.S. Patent and Trademark Office is hereby authorized to deliver to Assignee, its attorneys, agents, successors or assigns, all official documents and communications as may be warranted by this Assignment.

MENDES s.u.r.l.

By: 
Name: CLAUDIO DE SIMONE
Title: SOLE MANAGER
Date: 28/1/2005

Witnessed by:

SILVIO CARLO ERGOLI 

Date: 28/1/2005

ANDREA NICOLAI 

Date: 28/01/2005