

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the typographical error in assignor's name. Should be CONTINUING MEDICAL EDUCATION, INC. previously recorded on Reel 002998 Frame 651. Assignor(s) hereby confirms the assigns the entire interest and the goodwill.

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
CONTINUING MEDICAL EDUCATION, INC.		06/30/2004	CORPORATION: CALIFORNIA

RECEIVING PARTY DATA

Name:	CME LLC
Street Address:	2801 MCGAW AVENUE
City:	IRVINE
State/Country:	CALIFORNIA
Postal Code:	92614
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE

PROPERTY NUMBERS Total: 9

Property Type	Number	Word Mark
Serial Number:	78435743	CMEDUCATOR
Serial Number:	78409840	CME INFOSTORE
Serial Number:	76335758	MEDINFOSOURCE
Serial Number:	76419764	MEDREACH
Serial Number:	76335757	MENTAL HEALTH INFOSOURCE
Serial Number:	76494464	NEUROINFOSOURCE
Serial Number:	76494463	NEUROLOGYCME
Serial Number:	76330595	U.S. GERIATRIC & LONG-TERM CARE CONGRESS
Serial Number:	76331009	U.S. PSYCHIATRIC & MENTAL HEALTH CONGRESS

CORRESPONDENCE DATA

Fax Number: (310)282-2200

900023607

**TRADEMARK
 REEL: 003072 FRAME: 0463**

CH \$240.00 78435743

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

Phone: (310) 282-2000
Email: efilings@loeb.com
Correspondent Name: Susan L. Heller
Address Line 1: 10100 Santa Monica Blvd., Suite 2200
Address Line 4: Los Angeles, CALIFORNIA 90067

NAME OF SUBMITTER:	Grace E. Kim
Signature:	/gek/
Date:	04/25/2005

Total Attachments: 4
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Form PTO-1594 (Rev. 06/04)
OMB Collection 0851-0027 (exp. 6/30/2006)

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):
CONTINUING MEDICAL EDUCATION, INC.

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

Citizenship (see guidelines) California
 Execution Date(s) June 30, 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: CME LLC
 Internal Address: _____
 Street Address: 2801 MCGAW AVENUE
 City: IRVINE
 State: CA
 Country: USA Zip: 92614

Association Citizenship _____
 General Partnership Citizenship _____
 Limited Partnership Citizenship Delaware
 Corporation Citizenship _____
 Other Limited Liability Company Citizenship _____

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 (Redacted) Merger
 Security Agreement Change of Name
 Other EXCERPTS FROM AGREEMENT ATTACHED

4. Application number(s) or registration number(s) and Identification or description of the Trademark.
 A. Trademark Application No.(s) _____
 B. Trademark Registration No.(s) _____

SEE ATTACHMENT A ATTACHED

Additional sheet(s) attached? Yes No

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

5. Name & address of party to whom correspondence concerning document should be mailed:
 Name: JOSEPH GEISMAN, ESQ.
 Internal Address: c/o LOEB & LOEB LLP
 Street Address: 10100 SANTA MONICA BLVD.
SUITE 2200
 City: LOS ANGELES
 State: CA Zip: 90067
 Phone Number: 310 282 2079
 Fax Number: 310 282 2200
 Email Address: jgeisman@loeb.com

6. Total number of applications and registrations involved: 9

7. Total fee (37 CFR 2.8(b)(6) & 3.41) \$ 240.00

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 12-1820
 Authorized User Name Loeb & Loeb LLP

9. Signature: Joseph Geisman Signature Date December 23, 2004
 Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 4

Documents to be recorded (including cover sheet) should be faxed to (703) 505-8905, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

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Attachment A**CME LLC
(Assignment)**

TRADEMARK	Serial No. / Filing Date	Registration No. Reg. Date	Country
CMEDUCATOR	78/435,743 6/15/2004		USA
CME INFOSTORE	76/409,840 4/28/2004		USA
MEDINFOSOURCE	76/335,758 11/8/2001	2,677,141 1/21/2003	USA
MEDREACH	76/419,764 6/12/2002	2,832,759 4/13/2004	USA
MENTAL HEALTH INFOSOURCE	76/335,757 11/8/2001	2,680,322 1/28/2003	USA
NEUROINFOSOURCE	76/494,464 3/4/2003		USA
NEUROLOGYCME	76/494,463 3/4/2003		USA
U.S. GERIATRIC & LONG-TERM CARE CONGRESS	76/330,595 10/26/2001	2,837,439 4/27/2004	USA
U.S. PSYCHIATRIC & MENTAL HEALTH CONGRESS	76/331,009 10/26/2001	2,815,874 2/17/2004	USA

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