

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT		
NATURE OF CONVEYANCE:	Corrective Assignment to correct the receiving party's name previously recorded on Reel 002526 Frame 0960. Assignor(s) hereby confirms the assignment.		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
NextHealth, Inc.		06/05/2002	CORPORATION: DELAWARE
RECEIVING PARTY DATA			
Name:	Sierra Healthstyles LLC		
Street Address:	5000 East Via Estancia Maraval		
City:	Tucson		
State/Country:	ARIZONA		
Postal Code:	85793		
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	2114500	MIRAVAL LIFE IN BALANCE	
Registration Number:	2114511	MIRAVAL LIFE IN BALANCE	
Registration Number:	2152729	MIRAVAL	
CORRESPONDENCE DATA			
Fax Number:	(703)610-6200		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	703-610-6100		
Email:	boxip@hhlaw.com		
Correspondent Name:	Valerie Brennan		
Address Line 1:	8300 Greensboro Drive, Suite 1100		
Address Line 2:	Box Intellectual Property		
Address Line 4:	McLean, VIRGINIA 22102		
ATTORNEY DOCKET NUMBER:	21792.03		
NAME OF SUBMITTER:	Valerie Brennan		

CH \$90.00 2114500

Signature:

/valerie brennan/

Date:

11/01/2005

Total Attachments: 3

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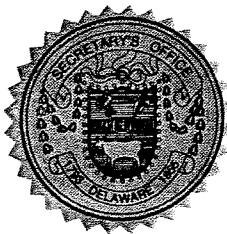
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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "SIERRA HEALTHSTYLES LLC", FILED IN THIS OFFICE ON THE SEVENTH DAY OF MARCH, A.D. 2002, AT 4 O'CLOCK P.M.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3500117 8100

050700335

AUTHENTICATION: 4134230

DATE: 09-02-05

TRADEMARK
REEL: 003184 FRAME: 0923

STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF
SIERRA HEALTHSTYLES LLC

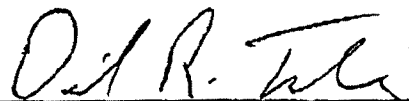
The undersigned, an authorized person within the meaning of Chapter 18, Title 6 of the Delaware Code (the "Act"), for the purpose of forming a limited liability company under the Act, hereby certifies that:

FIRST: The name of the limited liability company (hereinafter called the "Company") is:

Sierra HealthStyles LLC

SECOND: The address of the registered office and the address of the registered agent of the limited liability company required to be maintained by Section 18-104 of the Act is Corporation Trust Center, 1209 Orange Street, in the City of Wilmington, County of New Castle, Delaware 19801. The name of its registered agent at such address is The Corporation Trust Company.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation this 7TH day of March, 2002.



David R. Tavolier, Authorized Person

CONSENT TO USE OF NAME

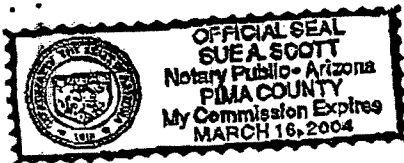
SIERRA HEALTH-STYLES, INC., a corporation
organized under the laws of the State of Delaware; hereby consents to
the (organization)(qualification) of Sierra HealthStyles LLC
in the State of Delaware.

IN WITNESS WHEREOF, the said _____

has caused this consent to be executed by

8th day of March 2002

By Bertha B. Kenny
Corporate Secretary



Sue A. Scott
Notary Public
March 8, 2002

{DELAWARE - 33 - 4/25/90}