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           |
|------------------------|----------|----------------|-----------------------|
| NeoThermia Corporation |          | 10/27/2005     | CORPORATION: DELAWARE |

#### **RECEIVING PARTY DATA**

| Name:             | Intact Medical Corporation |
|-------------------|----------------------------|
| Street Address:   | One Apple Hill             |
| Internal Address: | Suite 316                  |
| City:             | Natick                     |
| State/Country:    | MASSACHUSETTS              |
| Postal Code:      | 01760                      |
| Entity Type:      | CORPORATION: DELAWARE      |

PROPERTY NUMBERS Total: 8

| Property Type        | Number   | Word Mark  |
|----------------------|----------|------------|
| Serial Number:       | 78711136 | INTACT     |
| Registration Number: | 2605542  | NEOTHERMIA |
| Registration Number: | 2641244  | EN-BLOC    |
| Registration Number: | 2586410  |            |
| Registration Number: | 2867921  |            |
| Registration Number: | 2841791  |            |
| Registration Number: | 2841792  |            |
| Registration Number: | 2852005  |            |

#### **CORRESPONDENCE DATA**

Fax Number: (614)436-0057

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

Phone: 614.436.0600

Email: smueller@muellersmith.com

Correspondent Name: Jerry K. Mueller, Jr.

TRADEMARK REEL: 003195 FRAME: 0202 78711136

82/15/00

900036148

Address Line 1: 7700 Rivers Edge Drive Address Line 2: Mueller-Smith Building Columbus, OHIO 43235-1355 Address Line 4: ATTORNEY DOCKET NUMBER: NET NAME OF SUBMITTER: Jerry K. Mueller, Jr. Signature: /J.K. Mueller, Jr./ 11/16/2005 Date: **Total Attachments: 4** source=Intact Name Change#page1.tif source=Intact Name Change#page2.tif source=Intact Name Change#page3.tif source=Intact Name Change#page4.tif

> TRADEMARK REEL: 003195 FRAME: 0203

# F FPC

## The Commonwealth of Massachusetts

#### William Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Boston, Massachusetts 02108-1512

| (General Laws Chapter 156D, Section 15.04; 950 CMR 113.49)  t name of corporation: NeoThermia Corporation |  |
|---|--|
| of name of corporation. NonThormio Corporation  |  |
| t name of corporation: Neo mermia Corporation   |  |
| (as contained in the Division's records)  |  |
| stered office address: <u>One Apple Hill, Suite 316, Natick, M</u> A 01760                                |  |
| (number, street, city or town, state, zip code)   |  |
| amendment shall change:   |  |
| (check appropriate box(es))   |  |
| the corporation's name to**: Intact Medical Corporation   |  |
| the period of the corporation's duration to:  |  |
| the state or country of its incorporation to*:  |  |
| the street address of its principal office to:  |  |
|   | ***  |
| he activities conducted by the foreign corporation in the commonwealth:                                   |  |
|   |  |
| ther  |  |
|   | stered office address: One Apple Hill, Suite 316. Natick, MA 01760  (number, street, city or town, state, zip code)  amendment shall change: (check appropriate box(es))  the corporation's name to¹*: Intact Medical Corporation  the period of the corporation's duration to:  the state or country of its incorporation to*:  the street address of its principal office to:  the fiscal year end to:  the activities conducted by the foreign corporation in the commonwealth: |

P.C.

c156ds1504950c11349 01/13/05

<sup>&</sup>lt;sup>†</sup> The name must satisfy the requirements of G.L. Chapter 156D, Section 15.06.

<sup>\*</sup> If the amendment includes a change of its corporate name, or the state or country of its incorporation, attach a certificate evidencing the changes duly authenticated by the secretary of state or other official having custody of the corporate records in the state or country under whose law it is incorporated. If the certificate is in a foreign language, a translation thereof under oath of the translator shall be attached.

| is certificate is effective at the time and on the date approved by the Division, unless a later effective date<br>m the date of filing is specified: | e not more than 90 days |
|---|-------------------------|
| ned by:  (signature of authorized individual)  Ghairman of the board of directors,  | ·····,                  |
| (signature of authorized individual)  |                         |
| President,  |                         |
| ☑ Other officer, Vice President, Chief Financial Officer  |                         |
| ☐ Court-appointed fiduciary,  |                         |
|   |                         |
| this 20th day of October , 200  | )5                      |
|   |                         |

TRADEMARK REEL: 003195 FRAME: 0205

### **COMMONWEALTH OF MASSACHUSETTS**

#### William Francis Galvin

Secretary of the Commonwealth
One Ashburton Place, Boston, Massachusetts 02108-1512

# Certificate of Amendment (General Laws Chapter 156D, Section 15.04; 950 CMR 113.49)

I hereby certify that upon examination of this foreign certificate of amendment, duly submitted to me, it appears that the provisions of the General Laws relative thereto have been complied with, and I hereby approve said certificate; and the filing fee in the amount

|             | of \$having been paid, said certificate is deemed to have been filed with me t     | thi |
|-------------|--|-----|
|             | day of, 20, ata.m./p.m.  |     |
|             | ıme  |     |
|             | Effective date:  |     |
|             | (must be within 90 days of date submitted)   |     |
|             |  |     |
|             |  |     |
|             | WILLIAM FRANCIS GALVIN   |     |
|             | Secretary of the Commonwealth  |     |
|             | Filing fee: \$100  |     |
|             |  |     |
| ıminer      | TO BE FILLED IN BY CORPORATION   |     |
|             | Contact Information:   |     |
| me approval |  |     |
|             | Mark Devine c/o WCPHD  |     |
|             | CO Chata Ohio at   |     |
|             | 60 State Street  |     |
|             | Boston, MA 02109   |     |
|             |  |     |
|             | Telephone: 617-526-5122  |     |
|             | Telephone. 017-020-0122  |     |
|             | Email: mark.devine@wilmerhale.com  |     |
|             | Upon filing, a copy of this filing will be available at www.sec.state.ma.us/cor.   |     |
|             | If the document is rejected, a copy of the rejection sheet and rejected document w | ill |
|             | be available in the rejected queue.  |     |

M

TRADEMARK REEL: 003195 FRAME: 0206



### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "NEOTHERMIA CORPORATION", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "INTACT MEDICAL CORPORATION", THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2005, AT 1:08 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

3503792 8320

050879216

**RECORDED: 11/16/2005** 

Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

**AUTHENTICATION: 4257125** 

DATE: 10-27-05

TRADEMARK

REEL: 003195 FRAME: 0207