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onn PTO-1594 (Rev. 07/05)	U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office
MB Collection 0651-0027 (exp. 6/30/2008)  RECORDATION FOR  TRADEMAI	RM COVER SHEET
Te the Director of the U.S. Patent and Trademark Office: Pleas	se record the attached documents or the new address(es) below.
1. Name of conveying party(ies):  PolyMedica Pharmaceuticals (Puerto Rico), Inc.  Individual(s)  General Partnership  Corporation- State: Massachusetts  Other	2. Name and address of receiving party(ies)  Additional names, addresses, or citizenship attached?  No  Name: Polymedica Pharmaceuticals (Puerto Rico), Inc.  Internal  Address:  Street Address: 8681 Liberty Lane  City: Port St. Lucie  State: FL
Citizenship (see guidelines)Additional names of conveying parties attached?  Yes V No	Country: U.S.A. Zip: 34952
3. Nature of conveyance )/Execution Date(s):  Execution Date(s) November 22, 2002  ☐ Assignment ☐ Merger ☐ Security Agreement ☐ Change of Name ☐ Other See Attached Sheet  4. Application number(s) or registration number(s) are A. Trademark Application No.(s)	General Partnership Citizenship Limited Partnership Citizenship Corporation Citizenship Massachusetts Other 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)
5. Name & address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name: <u>Caesar. Rivise, Bernstein, Cohen &amp; Pokotilow. Ltd.</u> Internal Address:  Street Address: 1635 Market Street 11th Floor	7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed
City: <u>Philadelphia</u> State: <u>PA</u> Phone Number: ( <u>215) 567-2010</u> Fax Number:  Email Address:	B. Payment Information:  a. Credit Card Last 4 Numbers Expiration Date  b. Deposit Account Number 03-0075  Authorized User Name Allan H. Fried
9. Signature: Allon 14. Joint	NOV. 7, 2005
Signature  Allan H. Fried; Beg. No. 31,253  Name of Person Signing	Date  Total number of pages Including cover sheet, attachments, and document:  5

Documents to be recorded (including cover sheet) should be faxed to (\$71) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

#### Attached Sheet

#### <u>Box 3</u>

Correction of recipient entity status in original cover sheet to a corporation.

Reel/Frame: 002952/0803

Reg. No. 586,346

Form PTO-1594 RECORDAT RECORDAT TRAD	04-21-2004 	RTMENT OF COMMERCE
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To the Honorable Commissioner of Patents and Trademarks: Ple	ease record the attached original do	ocuments or copy thereof.
1. Name of conveying party(ies): PolyMedica Pharmaceuticals (Puerto Rico), Inc.  Individual(s) General Partnership Limited Partnership Corporation-State = Massachusetts Other Additional name(s) of conveying party(ies) attached? Yes No  3. Nature of conveyance: Assignment Security Agreement Security Agreement Change of Address Execution Date: November 22, 2002  4. Application number(s) or registration number(s):	2. Name and address of receiv Name: PolyMedica Ph Internal (Puerto Rico) Address:  Street Address: 8881 Lit Port St. Lucie State Individual(s) citizenship Association X General Partnership Maccordion-State Other If assignee is not domiciled in the Urepresentative designation is attach (Designations must be a separate d Additional name(s) & address(es) at	narmaceuticals , Inc.  perty Lane  a: FL Zip: 34952  assachusetts  nited States, a domestic  cd; Yea No ocument from assignment) ttached? Yes No
A, Trademark Application No.(s)Additional number(s) att		No.(s)586,346
Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of application registrations involved:	s and I
Name: Caesar, Rivise, Bernstein, Internal Address: Cohen & Pokotilow, LTD.	7. Total fee (37 CFR 3.41) Enclosed  Authorized to be cha	s 40.00 state account
Street Address: 1635 Market Street	8. Deposit account number:	
Seven Penn Center, 12th Floor  City: Philadelphia State: PA Zip: 19103-2212	03-0075 (Duplicate of this enclosed)	s Cover Sheet is
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9. Signature.  Allan H. Fried; Reg. No. 31,253	lla H. Jamil	APRIL 16 200

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Examiner

FEDERAL IDENTIFICATION
NO- A3-175385

Fcc: \$100.00

# The Commonwealth of Massachusetts

### William Francis Galvin

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

# CORDODATION CERTIFICATE

		AMENDED FOREIGN CORPORATION CERTIFICATE (General Laws, Chapter 181, Section 4)
Name Approved	1	Warren K. Trowbridge, "President ####################################
		Kuldeep Hajela , *Clerk /XIX/A xxxxxxxx x x x x x x x x x x x x x x
	1.	PolyMedica Pharmaceuticals (Puerto Rico), Inc. (Exact name of corporation)
	- 1	in compliance with the provisions of General Laws, Chapter 181, Section 4, certify that:
		1. The name of the corporation has been changed to:
	1	2. The location of its principal office has been changed to:
		8881 Liberty Lane, Port St. Lucie FL 34952  3. The location of its local office in the Commonwealth of Massachusetts has been changed to:
•		4. The activities of the corporation within the Commonwealth of Massachusetts have been changed to:
		5. The date of the corporation's fiscal year end has been changed to:
		6. The name and street address of the resident agent of the corporation in the Commonwealth of Missachusetts
,	,	is: 101 Federal Street, Boston, MA 02110
		7. The jurisdiction under the laws of which the corporation is organized or governed has been changed to:
P-2	0	President: Warren K. Trowbridge, 8881 Liberty Lane, Port St. Lucie FL 3495 8. Other: Vice President, Tressurer, Secretary: Kuldeep Bajela, 8881 Liberty Lane SIGNED UNDER THE PRINTING OF TRUMPRY, this
		a c , *President (***)
		the day clerk to cler
		*Delate the mapplicable words.  *Delate the mapplicable words.  Note: If this emeridance travolves a change of name or jurisdiction, a certificate of such change issued to this amended certificate. If Note: If this emeridance in the state or country in which such foreign corporation is organized must be attached to this amended certificate. If ethy authorized in the state or country in which such foreign corporation is organized must be attached.  ethy authorized in the state or country in which such foreign corporation thereof under the oath of the translator must be attached.  Such certificate is in a language other than English, a translation thereof under the oath of the translator must be attached.  TDADEMADE
P.C.		such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language other than English, a naverage such certificate is in a language of the certificate is in a language o

## THE COMMONWEALTH OF MASSACHUSETTS

### AMENDED FOREIGN CORPORATION CERTIFICATE (General Laws, Chapter 181, Section 4)

I hereby approve the within Amended Foreign Corpo and, the filing fee in the amount of \$	TANK COOL
day of	

### WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

# TO BE FILLED IN BY CORPORATION Photocopy of document to be sent to:

Jame C. Gilman, Hale and Dott LIP	-
60 State Street	_
Beston, FA 02110	_
Tricphone: 617,526,6000	_

<u>IKADEMARK</u>

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A.D. CAESAR (1901-1995) CHARLES RIVISE (1900-1951) COUNSEL ALLAN H. FRIED, PH.D.

ALSO ADMITTED TO PRACTICE IN N.  $^{\dagger}$  also admitted to practice in NY

#### FACSIMILE TRANSMITTAL SHEET

November 8, 2005

To:		From:	Allan H. Fried
Attn.:		Time:	
Fax No.:	571-273-0140	Our Ref.:	P1146/30006 (586,346)
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