

Form PTO-1594 (Rev. 07/05)
OMB Collection 0651-0027 (exp. 6/30/2008)

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To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

<p>1. Name of conveying party(ies): Beckman Instruments, Inc.</p> <p><input type="checkbox"/> Individual(s) <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>Citizenship (see guidelines) _____</p> <p>Additional names of conveying parties attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies) <input type="checkbox"/> Yes Additional names, addresses, or citizenship attached? <input checked="" type="checkbox"/> No</p> <p>Name: <u>Beckman Coulter, Inc.</u> Internal _____ Address: _____ Street Address: <u>4300 N. Harbor Boulevard</u> City: <u>Fullerton</u> State: <u>California</u> Country: <u>USA</u> Zip: <u>92834-3100</u></p> <p><input type="checkbox"/> Association Citizenship _____ <input type="checkbox"/> General Partnership Citizenship _____ <input type="checkbox"/> Limited Partnership Citizenship _____ <input checked="" type="checkbox"/> Corporation Citizenship <u>Delaware</u> <input type="checkbox"/> Other _____ Citizenship _____</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 (Designations must be a separate document from assignment)</p>
<p>3. Nature of conveyance)/Execution Date(s) : Execution Date(s) <u>April 2, 1998</u></p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____</p>	

<p>4. Application number(s) or registration number(s) and</p> <p>A. Trademark Application No.(s) _____</p>	<p>Identification or description of the Trademark.</p> <p>B. Trademark Registration No.(s) <u>1373232</u></p> <p>Additional sheet(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):
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<p>5. Name & address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Ladas & Parry</u> Internal Address: _____ Street Address: <u>5670 Wilshire Boulevard Suite 2100</u> City: <u>Los Angeles</u> State: <u>California</u> Zip: <u>90036</u> Phone Number: <u>323-934-2300</u> Fax Number: <u>323-934-0202</u> Email Address: <u>mhess@ladas.com</u></p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ _____</p> <p><input type="checkbox"/> Authorized to be charged by credit card <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed</p>
<p>8. Payment Information:</p> <p>a. Credit Card Last 4 Numbers _____ Expiration Date _____</p> <p>b. Deposit Account Number <u>12-0415</u> Authorized User Name _____</p>	

<p>9. Signature: <u>M. Iris Hess</u> Signature</p> <p><u>M. Iris Hess</u> Name of Person Signing</p>	<p>November 17, 2006 Date</p> <p>Total number of pages including cover sheet, attachments, and document: 3</p>
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Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "BECKMAN INSTRUMENTS, INC.", FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "BECKMAN COULTER, INC.", THE SECOND DAY OF APRIL, A.D. 1998, AT 2:30 O'CLOCK P.M.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3548883

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DATE: 12-14-04

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