RECORDATION FORM COVER SHEET TRADEMARKS ONLY  To the Director of the U. S. Parent and Trademark Office; Please record the attached documents or the new address(es) below.  Name of conveying party(ies):  Name of conveying party(ies):  Additional names, addresses, or othership attached?  No  Name; FLA Onthopedics, Inc.  Internal Address:  General Partnership  City: Minamax  State: FL  Country: USA  State: FL  Country: USA  Nature of conveying parties attached?  Nature of conveyance y/Execution Date(s):  Nature of conveyance y/Execution Date(s):  Assignment  Security Agreement  Change of Name  General Partnership  Individual in the United States, a domestic representative designation is attached:  No  Check  Application number(s) or registration number(s) and identification or description of the Trademark.	n PTQ-1594 (Rev. 03/05)	U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office
To this Director of the U. S. Parent and Tradomark Office: Please record the attached decuments or the new address(a) below.  Name of conveying party(tes):  Name and address of receiving party(tes):  Individuals(s)  Association  General Partnership  Limited Partnership  Corporation-State: Pet not Acc g.  Corporation-State: Pet not Acc g.  Corporation-State: Pet not Acc g.  Country: USA  Coun	RECORDATION FORM COVER SHEET TRADEMARKS ONLY	
Name at conveying party(tes):    Individual Corporation	Picture of the 11 S. Parent and Trademark Office; Please record the attached documents or the new address(es) below.	
Individual(s) Association Association Address:	Name of conveying party(ies): initiax Medical Corporation	2. Name and address of receiving party(rea)  Additional names, addresses, or ditrenship attached?  No
General Partnership  Gorporetion- State: Determore State:	Individualis)	Internal Address:
Corporation State:   Dec Acc Acc		Street Address: 2861 Coporate Way
Country: USA   Zip: 38026	Corporation-State: DELAWARE	City: Minamar
dilitional names of conveyance // Execution Date(s):		State: FL
Security of conveyance   Execution Date(s) :	ijizenship (see guidennes)	Country: USA
Nature of conveyance   Mexecution Date(s):	Additional names of conveying parties analoned? The VIII	
Assignment   Merger   Other	Nature of conveyance )/Execution Date(s) :	<del> </del>
Assignment	10/21/20=5	
Security Agreement		
Section Agreement   Telepresentative designation is attached:   Trademark   Designation must be a separate document from essignment	Long Hills	I
4. Application number(s) or registration number(s) and identification or description of the Trademark.  A. Trademark Application No.(s)  2.535,765; 1.554.099  Additional sheet(s) attached? Yes Y 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 !sames R. Mix  Internal Address: Jones Day  City: Cleveland  Street Address: 901 Lakesida Avanua  City: Cleveland  State: OH  Phone Number: 216-588-3939  Fax Number: 216-588-3939  Fax Number: 216-588-3939  Fax Number: 216-579-0112  Email Address: Jones R. Mix  Internal Address: Jones R. Mix  Signature  Signature  Signature  James R. Mix  Internal Ref. S60255-173001  Total number of applications and registration Number: 50-432  Authorized User Name James R. Mix  Total number of applications and registration Number: 50-432  Authorized User Name James R. Mix  Signature  James R. Mix  Int. Refine Ref. S60255-173001  Total number of applications and registration Number: 50-432  Authorized User Name James R. Mix  Total number of applications and registration Number: 50-432  Authorized User Name James R. Mix  Signature  James R. Mix  Int. Refine Ref. S60255-173001	□	representative designation is attached: too(Designations must be a separate document from assignment)
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: James R. Mix  Internal Address: Jones Day    Total number of applications and registrations involved:	4. Application number(s) or registration number(s) a A. Trademark Application No.(s)	
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: James R. Mix  Internal Address: Jones Day    Total number of applications and registrations involved:		Additional sheet(s) attached? Yes V No
registrations involved:    Name: James R. Mix	C. Identification or Description of Trademark(s) (and Fill)	ng Date if Application of Registration Number is unknown):
Internal Address: Jones Day  7. Total fee (37 CFR 2.5(b)(c) & 5.3-1)  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  Phone Number: 216-588-3936  Fax Number: 216-579-0112  Email Address: jonix@ionesdav.com  9. Signature  Signature  Signature  James R. Mix  Int. Billing Ref., 560255-1750013  James R. Mix  James R.	concerning document should be money.	6. Total number of applications and registrations involved:
Authorized to be charged by credit card  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed  Street Address: 901 Lakesida Avanua  City: Cleveland  State: OH  Phone Number: 216-586-3939  Phone Number: 216-586-3939  Fax Number: 216-579-0112  Email Address: jonix@ionesdav.com  Signature  Signature  July 8 / 95  Date  Signature  Signature  James R. Mix  Total number: of pages including ower of p		7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 68,90
Street Address: 901 Lakesida Avanua    City: Claveland	Internal Address: Jones Day	Authorized to be charged by credit card
City: Cleveland  State: OH  State: OH  Phone Number: 216-586-3939  Phone Number: 216-586-3939  By Deposit Account Number 50-4432  Authorized User Name James R. Mix  Email Address: jmix@ionesday.com  Ji/ 5 / 5  Signature  Signature  James R. Mix  Int. Billing Ref. 580255-1750013  James R. Mix  James R. Mix  James R. Mix  Jost Billing Ref. 580255-1750013	Street Address: 901 Lakesida Avenue	Authorized to be charged to deposit account
State: OH Zip: 44114 Expiration Date  Phone Number: 216-586-3939  b. Deposit Account Number: 50-1432  Fax Number: 218-579-0112  Email Address: jmix@ionestav.com  9. Signature  Signature  Signature  Ji/ 8 / 8 5  Date  Signature  James R. Mix  Total number of pages including ower after a stackments, and document: 6	City Claveland	
Fax Number: 216-579-0112  Email Address: jmix@ionesday.com  9. Signature  Signature  Signature  Total number of pages including ower after a large R. Mix  James R. Mix  Int. Billing Ref. 580255-1750013  James R. Mix  James R.	State: OH Zipt 44:14	Expiration Date
Email Address: jonix@ionestav.com  9. Signature:  Signature  Signature  Signature  Total number of pages including ower 6 street, attachments, and document:  6	Phone Number: 216-586-3939	, ·
9. Signature  Signature  Signature  Signature  Signature  Total number of pages including cover of pages including cover after a stackments, and documents.		Authorized User Name tames R. Mix
S. Signature  Signature  Signature  Signature  Signature  Solution Date  Signature  Solution Date  Signature  Solution Date  S	Email Address: jmlx@jonesdav.com	
James R. Mix Ont. Billing Ref., \$60255-1750013 Total number of pages including dover 6	9. Signature:	<u></u>
	James R. Mix Ont. Billing Ref. 5602	sheet, attachments, and document

Documents to be recorded (including power sheet) should be faxed to (763) \$36-6986, or mailes to:

Mail Stop Assignment Recordation Services, Director of the UBPTO, P.O. Box 1460, Alexandria, VA 22313-1460

# The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREDY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF OWNERSHIP, WHICH MERGES:

"CLINITEX MEDICAL CORPORATION", A DELAWARE CORPORATION, WITH AND INTO "FLA. ORTHOPEDICS, INC." UNDER THE NAME OF "FLA. ORTHOPEDICS, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF FLORIDA, AS RECEIVED AND FILED IN THIS OFFICE THE SECOND DAY OF MOVEMBER, A.D. 2005, AT 4:34 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF OWNERSHIP IS THE FIRST DAY OF DECEMBER, A.D. 2005.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

4054845 8100M

050896953

Warriet Smith Hindran

AUTHENTICATION: 4271582

DATE: 11-03-05

**TRADEMARK REEL: 003251 FRAME: 0110**  State of Deloware
Secretary of State
Division of Corporations
Delivered 04:49 RM 11/02/2005
FILED 04:34 PM 11/02/2005
SRV 050896953 - 2542176 FILE

CERTIFICATE OF OWNERSHIP AND MERGER

### MERGING

# CLINITEX MEDICAL CORPORATION

#### INTO

## FLA. ORTHOPEDICS, INC.

### OCTOBER 21, 2005

Pursuant to Section 253 of the General Corpuration Law of the State of Delaware

FLA. Orthopedics, Inc., a corporation organized and existing under the laws of the state of Florids (the "Corporation"), DOES HEREBY CERTIFY:

FIRET: That the Corporation was incorporated on the November 17, 1975, pursuam to the Florida Business Corporation Act.

SECOND: That the Corporation owns 100% of the outstanding shares of the capital stock of Clinitex Medical Corporation, a corporation incorporated on September 13, 1995 pursuant to the General Corporation Law of the State of Delaware ("Clinitex").

THIRD: The laws of the State of Florida permit the merger of a business corporation of that jurisdiction with a business corporation of another jurisdiction.

FOURTH: That the Corporation, by the following resolutions of its Board of Directors, duly adopted at a meeting of the Board of Directors on October 21, 2005, determined to merge Climites with and into the Corporation:

"RESOLVED, that the Board of Directors of the FLA. Orthopodics, Inc. (the "Corporation") has determined that the merger of its wholly-owned subsidiary, Clinitex Medical Corporation, a Delaware corporation ("Clinitex") with and into the Corporation, (the "Merger"), is advisable and in the best interests of the Corporation and Clinitex;

FURTHER RESOLVED, that Clinitex be merged with and into the Corporation pursuant to the laws of the State of Dolawsco and of the State of Florida, so that the separate existence of Clinitex shall cease as soon as the Merger shall become effective and the Corporation shall be the surviving corporation (the "Surviving Corporation"), which shall continue to exist under, and be governed by, the laws of the State of Florida;

FURTHER RESOLVED, that the terms and conditions of the Merger are as follows:

(a) From and after the Effective Time (as defined below) of the Merger, the Surviving Corporation will possess all of the rights, powers, privileges and franchises and shall assume all of the liabilities and obligations of Clinites, as provided under the laws of the State of Delaware and the State of Florida.

CLT-133302843

- (b) Each share of capital stock of Clinitex issued and outstanding immediately before the Effective Time will be cancelled and all rights thereof extinguished.
- (c) Each shart of Common Stock, per value \$.01 per share, of the Corporation issued and outstanding immediately before the Effective Time will continue to represent one validly issued, fully paid and non-assessable share of Common Stock, per value \$.01 per share, of the Surviving Corporation.
- (d) The Amended and Restated Articles of Incorporation of the Corporation immediately before the Effective Time shall be the Amended and Restated Articles of Incorporation of the Surviving Corporation and shall continue in full force and effect until amended and changed in the manner prescribed by the provisions of the Florida Business Corporation Act.
- (c) The Amended and Restaud Bylaws of the Corporation immediately before the Effective Time shall be the Amended and Restated Bylaws of the Surviving Corporation and shall continue in full force and effect until amended and changed in the manner prescribed by the provisions of the Florida Business Corporation Act.

FURTHER RESOLVED, that the merger shall be effective on December 1, 2005 (the "Effective Time"); and

FURTHER RESOLVED, that the Corporation shall cause to be executed and filed and/or recorded the documents prescribed by the laws of the State of Delaware (including a Certificate of Ownership and Merger), by the laws of the State of Florida (including Articles of Merger), and by the laws of any other appropriate jurisdiction and will cause to be performed all necessary acts within the jurisdictions of organization of Climitex and the Corporation and in any other appropriate jurisdiction."

Stare of Delaware in any proceeding for enforcement of any obligation of Clintex, as well as for enforcement of any obligation of this Corporation arising from the merger herein provided for; and enforcement of any obligation of this Corporation arising from the merger herein provided for; and enforcement of any obligation of this Corporation arising from the merger herein provided for; and enforcement of any obligation of this Scare are of the State of Delaware as its agent to accept does hereby irrevocably appoint the Secretary of State of the State of process in any such proceeding; and does hereby specify the following address without service of process in any such process shall be malled by the Secretary of State of the State of Delaware:

2881 Corporate Way, Miramar, Florida 33025

SIXTH: Anything herein or elsewhere to the contrary notwithstanding, this merger may be amended or terminated and abandoned by the Board of Directors of the Corporation at any time prior to the time that this merger filed with the Secretary of State becomes effective.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

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1/9/06 2:22 PAGE 008/009 Fax Server

IN WITNESS WHEREOF, the Corporation has caused this Certificate to be duly executed as of the date first written above.

FLA. ORTHOPEDICS, INC.

CT-1373031vi

**TRADEMARK REEL: 003251 FRAME: 0113**