


Client Code: CHARDUNTM.UCC1

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

To the Director, U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): (List using letters or numbers for multiple parties)</p> <p>AMBRY GENETICS CORPORATION</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other: <input checked="" type="checkbox"/> Corporation of: California</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: KNOBBE, MARTENS, OLSON & BEAR, LLP Internal Address: Fourteenth Floor Street Address: 2040 Main Street City: Irvine State: CA ZIP: 92614</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input checked="" type="checkbox"/> Limited Partnership <input type="checkbox"/> Other: <input type="checkbox"/> Corporation of:</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</p> <p>Additional name(s) and address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Merger <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other: Security Interest</p> <p>Execution Date: (List as in section 1 if multiple signatures) January 11, 2006</p>	<p>4. Application number(s) or registration number(s):</p> <p>a. Trademark Application No(s):</p> <p>b. Trademark Registration No(s): 2,656,052</p> <p>Additional numbers attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>5. Party to whom correspondence concerning document should be mailed:</p> <p>Customer No. 20,995 Address: Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 Return Fax: (949) 760-9502 Attorney's Docket No.: CHARDUNTM.UCC1</p>	<p>6. Total number of applications and registrations involved: 3</p> <p>7. Total fee (37 CFR 1.21(h)): \$90.00 <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p>
<p>8. Deposit account number: 11-1410</p> <p>Please charge this account for any additional fees which may be required, or credit any overpayment to this account.</p>	
<p>9. Statement and signature.</p> <p>To the best of my knowledge and belief, the foregoing information is true and correct, and any attached copy is a true copy of the original document.</p> <p>James B. Bear Name of Person Signing  Signature Date <u>1/16/06</u></p> <p>Total number of pages including cover sheet, attachments and document: 3</p>	

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Documents transmitted via Facsimile to be recorded with required cover sheet information to:

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 Facsimile Number: (571) 273-0140

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]Ybarra
(949) 721-5265**B. SEND ACKNOWLEDGMENT TO: (Name and Address)**Knobbe, Martens, Olson & Bear, LLP
2040 Main Street, 14th Floor
Irvine, CA 92614
USA

DOCUMENT NUMBER: 6470920002

FILING NUMBER: 06-7055013239

FILING DATE: 01/11/2006 14:27

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names****1a. ORGANIZATION'S NAME**OR
Ambry Genetics Corporation**1b. INDIVIDUAL'S LAST NAME****FIRST NAME****MIDDLE NAME****SUFFIX****1c. MAILING ADDRESS**

100 Columbia, #200

CITY

Aliso Viejo

STATE

Ca

POSTAL CODE

92656

COUNTRY

USA

1d. SEE INSTRUCTIONS**ADD'L DEBTOR INFO****1e. TYPE OF ORGANIZATION**

Corp.

1f. JURISDICTION OF ORGANIZATION

CA

1g. ORGANIZATIONAL ID#, if any NONE**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names****2a. ORGANIZATION'S NAME****2b. INDIVIDUAL'S LAST NAME****FIRST NAME****MIDDLE NAME****SUFFIX****2c. MAILING ADDRESS****CITY****STATE****POSTAL CODE****COUNTRY****2d. SEE INSTRUCTIONS****ADD'L DEBTOR INFO****2e. TYPE OF ORGANIZATION****2f. JURISDICTION OF ORGANIZATION****2g. ORGANIZATIONAL ID#, if any** NONE**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)****3a. ORGANIZATION'S NAME**OR
Knobbe, Martens, Olson & Bear, LLP**3b. INDIVIDUAL'S LAST NAME****FIRST NAME****MIDDLE NAME****SUFFIX****3c. MAILING ADDRESS**

2040 Main Street, 14th Floor

CITY

Irvine

STATE

Ca

POSTAL CODE

92614

COUNTRY

USA

4. This FINANCING STATEMENT covers the following collateral:

See Attachment(s)

5. ALT DESIGNATION: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional] All Debtors Debtor 1 Debtor 2**8. OPTIONAL FILER REFERENCE DATA**

CHARDUN

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TRADEMARK

REEL: 003251 FRAME: 0215

Trademark Status Report

Case Number	Trademark Name	Class	Country	Status	Application Number	Filing Date	Reg Number	Reg Date	Renewal Date
CHARDUN005T	THE AMBRY TEST	1, 5, 42	US	Registered	76/292908	7/31/2001	2656052	12/3/2002	12/3/2012
CHARDUN007T	AMBRY GENETICS	1, 5, 42	US	Registered	76/292913	7/31/2001	2674217	1/14/2003	1/14/2013
CHARDUN014M	THE AMBRY TEST	1, 5, 42	US	Opposition					
CHARDUN025T	AMBRYGEN	5, 44	US	Allowed	78/388594	3/22/2004			
CHARDUN035C1	Security Interest Bill		US	Security					

Wednesday, January 11, 2006

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