

TRADEMARK ASSIGNMENT

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
Automated Prescription Systems, Inc.		10/27/1998	CORPORATION: LOUISIANA
RECEIVING PARTY DATA			
Name:	McKesson Automated Prescription Systems, Inc.		
Street Address:	2800 S. McArthur Drive		
Internal Address:	Suite 100		
City:	Alexandria		
State/Country:	LOUISIANA		
Postal Code:	71303		
Entity Type:	CORPORATION: LOUISIANA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	1051166	DRUG-O-MATIC	
CORRESPONDENCE DATA			
Fax Number:	(415)983-9369		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	415 983 8323		
Email:	nina.steinman@mckesson.com		
Correspondent Name:	Nina Steinman		
Address Line 1:	One Post Street		
Address Line 2:	33rd Floor Law Department		
Address Line 4:	San Francisco, CALIFORNIA 94104		
ATTORNEY DOCKET NUMBER:	DRUGOMATIC APS TO MAPS		
NAME OF SUBMITTER:	Glenette Babb		
Signature:	/glenette babb/		

OP \$40.00 1051166

Date:

03/30/2006

Total Attachments: 2

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UNITED STATES OF AMERICA

State of



Louisiana

Jox McKeithen

SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

a copy of an Amendment to the Articles of Incorporation of
AUTOMATED PRESCRIPTION SYSTEMS, INC.

Domiciled at NEW ORLEANS, LOUISIANA, changing the corporate
name to

MCKESSON AUTOMATED PRESCRIPTION SYSTEMS, INC.

Was filed and recorded in this Office on October 27, 1998.

FILED
RECORDS & DEEDS
PARISH OF ORLEANS

OCT 31 10 00 AM '98

98-50399 829

NOTARIAL RECORDS
PARISH OF ORLEANS

*In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on,*

October 27, 1998

Jox McKeithen

BBE 24304390D 34701115
Secretary of State



