

03-17-2006



3/10/06

TRADE

103200547

OVER SHEET

To the Honorable Commissioner of Patent and Trademarks: Please record the attached original documents or copies thereof.

1. Name(s) of conveying party:

Apibio

\_\_\_ Individual (s) \_\_\_ Association  
\_\_\_ General Partnership \_\_\_ Limited Partnership  
XX Corporation-State France  
\_\_\_ Other: \_\_\_\_\_

Additional party(ies) attached? \_\_\_ Yes XX No

2. Name and address of receiving party:

Name: bioMérieux

Address: \_\_\_\_\_

Internal Address: \_\_\_\_\_

City: 69280 Marcy l'Etoile

Country: France

\_\_\_ Individual(s) - citizenship: \_\_\_\_\_

\_\_\_ Association: \_\_\_\_\_

\_\_\_ General Partnership: \_\_\_\_\_

\_\_\_ Limited Partnership: \_\_\_\_\_

XX Corporation: France

\_\_\_ Other: \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached: \_\_\_ Yes XX No  
(Designations must be a separate document from Assignment)

Additional name(s) & address(es) attached? \_\_\_ Yes XX No

OFFICE OF PUBLIC RECORDS  
2006 MAR 14 AM 10:30  
FINANCE SECTION 11

3. Nature of conveyance:

\_\_\_ Assignment XX Merger  
\_\_\_ Security Agreement \_\_\_ Change of Name  
\_\_\_ Other: \_\_\_\_\_

Execution Date: June 9, 2005 (effective January 19, 2005)

4. Application number(s) or registration number(s):

A. Trademark Application No(s):

78/201,531 and 78/201,511

B. Trademark Registration No(s):

N/A

Additional number(s) attached? \_\_\_ Yes XX No

5. Name and address of party to whom correspondence concerning the document should be mailed:

Name: Kenneth F. Florek, Esq.  
HEDMAN & COSTIGAN, P.C.

Address: 1185 Avenue of the Americas  
City: New York State: NY Zip: 10036

7. Total fee (37 CFR 3.41) \$80.00 is

XX enclosed.  
\_\_\_ authorized to be charged to Deposit Account.

8. Deposit Account Number: 08-1540

6. Total number of applications and registrations involved: 2

03/16/2006 DBYRNE 00000007 78201531

XX Authorization is given to charge Deposit Account if the enclosed fee is deficient.

01 FC:8521  
02 FC:8522

40.00 OP  
25.00 OP

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Refund Ref: 03/16/2006 DBYRNE 0000150708

CHECK Refund Total: \$15.00

9. Statement and signature:

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.

Kenneth F. Florek, Reg. No. 33,173

Name

Signature

March 10, 2006

Date

(Total number of pages including cover sheet, attachments and document: 4)

TRADEMARK

REEL: 003316 FRAME: 0349

M4

COISA

N°1685\*01

# DECLARATION DE RADIATION

## PERSONNE MORALE

La fermeture d'établissement relevant d'un autre greffe se déclare sur un imprimé M2.

RESERVE AU GFE M G U I D B E F H J K T

Déclaration reçue le 17/09/2005 transmise le 28/09/2005

### RAPPEL D'IDENTIFICATION

1 N° UNIQUE D'IDENTIFICATION 433975304  
 2 IMMATRICULATION AU RCS DU GREFFE DE LYON  
 AU RM DANS LE DEPT. DE \_\_\_\_\_

Désignation du centre des impôts où ont été déposées les dernières déclarations de résultats et de TVA \_\_\_\_\_

DENOMINATION APIBIO SAS -  
 Forme juridique SAS  
 SIEGE pour les sociétés françaises / PREMIER ETABLISSEMENT en France d'une société étrangère :  
 rés., bat., app., étage, n°, voie, lieu dit Chemin de l'Orme -  
 Code postal 69300 Commune NARCY L'ETOLE  
 Si contrat de domiciliation : Nom de l'entreprise domiciliaire \_\_\_\_\_

### DECLARATION RELATIVE A LA PERSONNE

4 DATE DE CESSATION TOTALE D'ACTIVITE : 09/06/2005  
 ambulancier, joindre la carte d'ambulancier.  
 5 PRESENCE DE SALAIRES dans l'entreprise au moment de la radiation  Oui  Non

DISSOLUTION : \_\_\_\_\_  
 Clôture de la liquidation : Date \_\_\_\_\_  
 Réalisation du transfert de patrimoine réunion des parts sociales dans une même main : Date \_\_\_\_\_  
 Fusion  Scission Date de dissolution - disparition : 09/06/2005

### DECLARATION RELATIVE A LA FERMETURE D'ETABLISSEMENT(S) - Suite sur intercalaire(s) M'

ETABLISSEMENT(S) AUTRE(S) QUE LE SIEGE ET SIMULTANEMENT FERME(S) PAR \_\_\_\_\_

6 rés., bat., app., étage, n°, voie, lieu dit AS rue des martyrs - Zone ASIEE  
 Code postal 69054 Commune GRENOBLE - C. de la 04  
 Destination :  Suppression  Vente  Autre \_\_\_\_\_

Code postal \_\_\_\_\_  
 Destination :  Suppression  Vente  Autre \_\_\_\_\_

### DECLARATION SOCIALE à remplir par les personnes affiliées au régime TNS - Suite sur intercalaire(s) M'

7 NOM DE NAISSANCE \_\_\_\_\_  
 Norm d'usage \_\_\_\_\_ Né(e) le \_\_\_\_\_  
 Prénoms \_\_\_\_\_  
 Dépt. \_\_\_\_\_ Commune / Pays si à l'étranger \_\_\_\_\_  
 Caisse d'assurance maladie TNS \_\_\_\_\_  
 Caisse de retraite \_\_\_\_\_

NOM DE NAISSANCE \_\_\_\_\_  
 Norm d'usage \_\_\_\_\_ Né(e) le \_\_\_\_\_  
 Prénoms \_\_\_\_\_  
 Dépt. \_\_\_\_\_ Commune / Pays si à l'étranger \_\_\_\_\_  
 Caisse d'assurance maladie TNS \_\_\_\_\_  
 Caisse de retraite \_\_\_\_\_

### RENSEIGNEMENTS COMPLEMENTAIRES

8 OBSERVATIONS : Fusion - absorption de la SA APIBIO pour la SA biogénex et ce que l'Etat a accepté et ce que l'Etat a refusé  
 9 Adresse de correspondance Rés., bat., n°, voie, lieu dit Chemin de l'Orme -  
Service principale Code Postal 69300 Commune Narcy l'etole  
 Téléphone(s) \_\_\_\_\_  
 Fax/e-mail 04 78 87 53 70

La présente demande constitue déclaration de radiation au RCS au RM, au REB aux services fiscaux, aux organismes de sécurité sociale, à l'INSEE et s'il y a lieu, à l'inspection du travail.  
 Quelconques copies, de mauvaise foi, des indications inexactes ou incomplètes s'exposent à des sanctions pénales pouvant aller jusqu'à l'emprisonnement.

10 LE REPRESENTANT LEGAL \_\_\_\_\_  
 LE MANDATAIRE ayant procuration Monsieur Alain Melieux, Président  
 AUTRE PERSONNE Justifiant d'un intérêt \_\_\_\_\_

Certifie l'exactitude des renseignements donnés  
 Fait à Narcy l'etole  
 le 09/06/2005  
 Nombre d'intercalaires M' \_\_\_\_\_

SIGNATURE  


Signer chaque feuille séparément.

La loi n°78-17 du 6 janvier 1978 relative à l'informatique, aux fichiers et aux libertés, s'applique aux réponses faites à ce formulaire pour les personnes physiques. Elle leur garantit un droit d'accès et de rectification pour les données les concernant auprès des organismes destinataires de ce formulaire.

TRADEMARK

REEL: 003316 FRAME: 0350

<b>M4 COSA</b>	<b>DECLARATION OF DE-REGISTRATION</b>	<b>RESERVED FOR CFE M G U I D B E F H J K T</b>
No. 11685*01	<b>CORPORATION</b>	Declaration No. 069018128681
Closure of an undertaking covered by another registry to be made on form M2.		Received on 29/07/2005 forwarded on 09/08/2005

**IDENTITY DETAILS**

UNIQUE IDENTITY No. 433975307

X REGISTRATION IN RCS [TRADE AND COMPANIES REGISTER]: LYON

IN THE RM [REGISTER OF CRAFTSMEN] IN THE DEPARTMENT OF \_\_\_\_\_

Name of the tax office with which the last financial statements and VAT returns were filed \_\_\_\_\_

**CORPORATE STYLE** APIBIO SAS

Legal form SAS

**REGISTERED OFFICE for French companies / PRINCIPAL PLACE OF BUSINESS in France for a foreign company:**

house., building, apt., floor, No., street, place Chemin de l'Orme \_\_\_\_\_

Post Code 69380 Commune Marcy l'Etoile

In the case of a business address agreement: \_\_\_\_\_

Name of host undertaking \_\_\_\_\_

**DECLARATION IN RELATION TO THE LEGAL PERSON**

**DATE ON WHICH TRADING CEASED IN FULL:** 09/06/2005

Itinerant, attach itinerant's licence.

**EMPLOYEES IN POST on the date of de-registration**

Yes  No

**DISSOLUTION:**

Completion of winding up: Date \_\_\_\_\_

Completion of transfer of assets and liabilities: transfer of all shares to the same person : Date \_\_\_\_\_

Merger  Hive off Date of dissolution - disappearance: 09/06/2005

**DECLARATION CONCERNING THE CLOSURE OF UNDERTAKING(S) - Continue on separate sheet(s) M'**

**ESTABLISHMENT(S) OTHER THAN THE REGISTERED OFFICE AND CLOSED SIMULTANEOUSLY AT THE SAME REGISTRY**

House, building, apt., floor, No., street, place 15 rue des Marytrs - zone ASTEC \_\_\_\_\_

Post Code 38054 Commune Grenoble Cedex 09 \_\_\_\_\_

Purpose:  Closure  Sale  Other \_\_\_\_\_

**SOCIAL SECURITY DECLARATION to be completed by persons who are members of the TNS [Self Employed Persons] Scheme - Continue on separate sheet(s) M'**

**NAME AT BIRTH** \_\_\_\_\_

Usual name \_\_\_\_\_

First name(s) \_\_\_\_\_ Born on \_\_\_\_\_

Dept. \_\_\_\_\_ Commune / Country, if abroad \_\_\_\_\_

TNS health insurance fund \_\_\_\_\_ Dept. \_\_\_\_\_

Pension fund \_\_\_\_\_

**ADDITIONAL INFORMATION**

**NOTES:** Merger - absorption of APIBIO by bioMérieux with retroactive effect to 19/01/05. Principal place of business in Grenoble is closed -> becomes secondary to the absorbing company.

**Address for correspondence** House, building, No., street, place Chemin de l'Orme, Service Juridique

Post Code 69280 Commune Marcy l'Etoile

Telephone No(s) 04 78 87 20 54

Fax / e-mail 04 78 87 53 70

This application constitutes a declaration of de-registration in the RCS, the RM, the REB [Register of European patents], with the tax authorities, the social security organisations, INSEE and as appropriate, the labour inspectorate. Any person acting in bad faith who provides inaccurate or incomplete information shall be subject to criminal sanctions which could result in imprisonment.

**X LEGAL REPRESENTATIVE surname, name / name and address**

AGENT with power of attorney Mr Alain MERIEUX (President)

**SIGNATURE**

Certifies the accuracy of the information given  
Done in Marcy l'Etoile  
On 09/06/2005

Sign each sheet separately.

TRADEMARK

REEL: 003316 FRAME: 0351

OTHER PERSON evidencing an interest

Chairman

Law No. 78-17 of 6 January 1978 concerning data processing, data files and individual liberties is applicable to the information given on this form by individuals. It guarantees them the right of access to and correction of any data concerning them held by the recipients of this form.