

5-20-06

05-31-2006

Form PTO-1594 (Rev. 06/04)
OMB Collection 0651-0027 (exp. 6/30/2005)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office



RE
103247416

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

1. Name of conveying party(ies)/Execution Date(s):

Mary Black Health Systems, LLC

- Individual(s)
- General Partnership
- Corporation-State
- Other South Carolina Limited Liability Company
- Association
- Limited Partnership

Citizenship (see guidelines) _____

Execution Date(s) May 15, 2006

Additional names of conveying parties attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Triad Hospitals, Inc.

Internal _____

Address: _____

Street Address: 5800 Tennyson Parkway

City: Plano

State: Texas

Country: U.S.A. Zip: 75024

- Association Citizenship _____
- General Partnership Citizenship _____
- Limited Partnership Citizenship _____
- Corporation Citizenship Delaware
- Other _____ Citizenship _____

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

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

78/481,559

B. Trademark Registration No.(s)

Additional sheet(s) attached? Yes 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: Docket Clerk

Internal Address: _____

Street Address: P.O. Drawer 800889

City: Dallas

State: Texas Zip: 75380

Phone Number: 972-628-3600

Fax Number: 972-628-3616

Email Address: _____

6. Total number of applications and registrations involved:

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00

- 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 _____

b. Deposit Account Number 50-0208

Authorized User Name James F. Chester

9. Signature:

James F. Chester

Signature

May 22, 2006

Date

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: _____


Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

OFFICE OF FEDERAL RECORDS
MAY 26 PM 1:19
FINANCE SECTION
00000045 78481559
40.00
05/30/2006
101 FD-4521

ASSIGNMENT OF SERVICE MARK RIGHTS

This Assignment of Service Mark Rights (this "Assignment") is between Mary Black Health Systems, LLC, a South Carolina Limited Liability Company ("Mary Black Health Systems") and Triad Hospitals, Inc., a Delaware Corporation ("Triad"), (collectively hereafter referred to as the parties).

WHEREAS, Mary Black Health Systems is the owner of the Service Mark application as listed in the table below:

MARK	SERIAL NUMBER	FILING DATE
 MARY BLACK HEALTH SYSTEM	78/481,559	September 10, 2004

WHEREAS, Mary Black Health Systems desires to convey, transfer and assign to Triad all of its right, title, and interest in and to the application and mark.

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged.

Mary Black Health Systems hereby conveys, transfers and assigns to Triad all right, title and interest in and to the application and mark, including, but not limited to, rights to any past or existing causes of action and past or existing damages associated therewith, together with the goodwill of the business(es) symbolized by the same, and together with the entire business or portion of business to which the mark pertains.


Mary Black Health Systems, LLC

By: *Sheryl L. Wright*

Title: *Hospital Administrator*

Date: *5/10/06*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Mary Black Health Systems, LLC
 Serial No. : 78/481,559
 Filed : September 10, 2004
 Mark : 
 Class : 041, 042 & 044
 Trademark Attorney : John David Dalier
 Law Office : 106

Mail Stop Assignment Recordation Services
 Director of the USPTO
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

CERTIFICATE OF MAILING BY FIRST CLASS MAIL

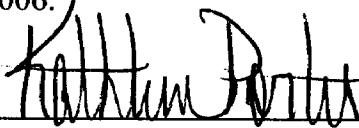
Sir:

The undersigned hereby certifies that the following documents:

1. Recordation Form Cover Sheet;
2. Executed Assignment;
3. Check in the amount of \$40.00;
4. A postcard receipt

relating to the above application, were deposited as "First Class Mail" with the United States Postal Service, addressed to Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, Virginia 22313-1450, on May 22, 2006.

Date: May 22, 2006



Mailer

Date: May 22, 2006



J. F. Chester
 Texas State Bar No. 24001877

P.O. Drawer 800889
 Dallas, Texas 75380
 Phone: (972) 628-3600
 Fax: (972) 628-3616
 E-mail: jchester@munckbutrus.com