

11-17-2006

FORM PTO-1594 (Rev. 6-93)

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OPR/FINANCE U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

OMB No. 0651-0011 (exp. 4/94) MED 11/15/06

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

<p>1. Name of Conveying party(ies): HEALTHeNET Inc. Delaware Corporation</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies) Nightingale Informatix Corporation CANADA 3760 14th Avenue Suite 200 Markham ON L3R 3T7</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Designations must be a separate document from assignment)</p> <p>Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____</p> <p>Execution Date: 10/30/2006</p>	<p>4. Application number(s) or patent number(s):</p> <p>A. Trademark Application Number(s) 78/608967</p> <p>B. Trademark Registration Number(s)</p> <p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>5. Name and address of party to whom correspondence concerning document should be mailed: Name: Corporate Creations P.L. Internal Address: Attention: Stephen T. Samuel Street Address: 6001 W. Parmer Lane, Suite 370-157 City: Austin State: TX ZIP: 78727</p>	<p>6. Total number of applications and registrations involved 1</p> <p>7. Total fee (37 CFR 3.41): <input type="checkbox"/> \$40 check enclosed for regular service <input checked="" type="checkbox"/> \$160 check enclosed for EXPEDITED SERVICE <input type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: <small>(Attach duplicate copy of this page if paying by deposit account)</small></p>

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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.

Stephen T. Samuel		November 15, 2006
Name of Person Signing	Signature	Date

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

Mail documents to be recorded with required cover sheet information to:
Mail Stop Assignment Recordation Services
Director of the United States Patent and Trademark Office

11/17/2006 DBYRNE 00000012 78608967
01 FC:8521 40.00 DP
02 FC:8523 120.00 DP
Alexandria, VA 22313-1450

Assignment of Trademark

Assignor(s):

HEALTHeNET Inc.
Delaware Corporation

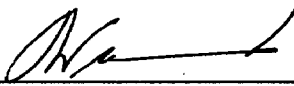
Assignee(s):

Nightingale Informatix Corporation
Canada Corporation

“Trademark” means the trademark HEALTHEFAX (AND DESIGN) and all applications and registrations relating to the Trademark, including United States Patent and Trademark Office Serial Number 78/608967.

For good and valuable consideration, receipt of which is acknowledged, Assignor assigns to Assignee(s) all of Assignor’s rights in the Trademark together with the goodwill of the business in which the trademark is used. Assignor also assigns to Assignee(s) the right to recover for damages and profits for past infringement of the Trademark. Assignor agrees to perform all reasonable acts, including executing and delivering all papers, instruments and assignments, that Assignee(s) may require in order to vest in Assignee(s) all of Assignor’s rights in the Trademark.

HEALTHeNET Inc.

By: 

Print Name: WARREN HILL

Print Title: PRESIDENT

Date: OCT 30/06