

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
COMED COMMUNICATIONS, INC.		12/29/2004	CORPORATION: PENNSYLVANIA
RECEIVING PARTY DATA			
Name:	INSTITUTE FOR CONTINUING HEALTHCARE EDUCATION, INC.		
Street Address:	THE CURTIS CENTER, SUITE 250		
Internal Address:	INDEPENDENCE SQUARE WEST		
City:	PHILADELPHIA		
State/Country:	PENNSYLVANIA		
Postal Code:	19103		
Entity Type:	CORPORATION: PENNSYLVANIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2575434	COMED	
CORRESPONDENCE DATA			
Fax Number:	(215)299-2150		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	215.299.2010		
Email:	MMCCREARY@FOXROTHSCHILD.COM		
Correspondent Name:	MARK G. MCCREARY		
Address Line 1:	2000 MARKET STREET, TENTH FLOOR		
Address Line 4:	PHILADELPHIA, PENNSYLVANIA 19103		
ATTORNEY DOCKET NUMBER:	59461-001		
NAME OF SUBMITTER:	MARK G. MCCREARY		
Signature:	/MARK G. MCCREARY/		

CH \$40.00 2575434

Date:

12/15/2006

Total Attachments: 9

source=Comed - Name and Address Change for USPTO#page1.tif

source=Comed - Name and Address Change for USPTO#page2.tif

source=Comed - Name and Address Change for USPTO#page3.tif

source=Comed - Name and Address Change for USPTO#page4.tif

source=Comed - Name and Address Change for USPTO#page5.tif

source=Comed - Name and Address Change for USPTO#page6.tif

source=Comed - Name and Address Change for USPTO#page7.tif

source=Comed - Name and Address Change for USPTO#page8.tif

source=Comed - Name and Address Change for USPTO#page9.tif

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU

Consent to Appropriation of Name
(19 Pa. Code § 17.2)
 Consent to Use of Similar Name
(19 Pa. Code § 17.3)

Pursuant to 19 Pa. Code § 17.2 (relating to appropriation of the name of a senior corporation) and § 17.3 (relating to use of a similar name) the undersigned association, desiring to consent to the appropriation/use of similar name of its name by another association, hereby certifies that:

1. The name of the association executing this Consent of Name is:
Institute for Continuing Healthcare Education, Inc.

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):
(a) Number and Street City State Zip County
210 West Washington Square, Philadelphia, PA 19106 Philadelphia County
(b) Name of Commercial Registered Office Provider County
N/A

3. The date of its incorporation or other organization is: 4-23-80

4. The statute under which it was incorporated or otherwise organized is: PA Business Corp. Law

5. The association(s) entitled to the benefit of this Consent of Name is(are):
CoMed Communications, Inc. (Institute for Continuing Healthcare Education, Inc. being merged into CoMed Communications, Inc.)

6. If Consent to Appropriation of Name, the association is about to (check one):
 Change its name Cease to do business Withdrawal from doing business in PA Being wound up

7. If Consent to Use of Similar Name, check box
 Indicates that the association executing this Consent to Use of Similar Name is the parent or prime affiliate of a group of associations using the same name with geographic or other designations, and that such association is authorized to and does hereby act on behalf of all such affiliated associations, including the following (see 19 Pa. Code § 17.3(c)(6)).

IN TESTIMONY WHEREOF, the undersigned association has caused this consent to be signed by a duly authorized officer thereof
this 26th day of December 2004
[Signature]

Signature
[Signature]

Title

2004113-849

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU

Articles/Certificate of Merger

(15 Pa.C.S.)

Entity Number

2559423

- Domestic Business Corporation (§ 1926)
- Domestic Nonprofit Corporation (§ 5926)
- Limited Partnership (§ 8547)

Name

Address

City

CT CORP-COUNTER

Document will be returned to the name and address you enter to the left

←

Fee: \$150 plus \$40 additional for each Party in addition to two

Filed in the Department of State on

DEC 30 2004

Pedro C. Cortes

Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions (relating to articles of merger or consolidation), the undersigned, desiring to effect a merger, hereby state that:

1. The name of the corporation/limited partnership surviving the merger is:
CoMed Communications, Inc.

2. Check and complete one of the following.

The surviving corporation/limited partnership is a domestic business/nonprofit corporation/limited partnership and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street:	City	State	Zip	County
210 West Washington Square,	Philadelphia, PA	19106,	Philadelphia	County

(b) Name of Commercial Registered Office Provider _____ County _____
c/o _____

The surviving corporation/limited partnership is a qualified foreign business/nonprofit corporation/limited partnership incorporated/formed under the laws of _____ and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
-----------------------	------	-------	-----	--------

(b) Name of Commercial Registered Office Provider _____ County _____
c/o _____

The surviving corporation/limited partnership is a nonqualified foreign business/nonprofit corporation/limited partnership incorporated/formed under the laws of _____ and the address of its principal office under the laws of such domiciliary jurisdiction is

Number and Street	City	State	Zip
-------------------	------	-------	-----

3. The name and the address of the registered office in this Commonwealth or name of its commercial registered office provider and the county of venue of each other domestic business/nonprofit corporation/limited partnership and ~~qualified foreign business/nonprofit corporation/limited partnership~~ which is a party to the plan of merger are as follows:

Name	Registered Office Address	Commercial Registered Office Provider	County
Institute for Continuing Healthcare Education, Inc	210 West Washington Square, Philadelphia, PA 19106		Philadelphia County

4. Check, and if appropriate complete, one of the following

The plan of merger shall be effective upon filing these Articles/Certificate of Merger in the Department of State

The plan of merger shall be effective on 12-30-04 at 12.00 am

Date Hour

5. The manner in which the plan of merger was adopted by each domestic corporation/limited partnership is as follows.

Name	Manner of Adoption
CoMed Communications, Inc	Unanimous Consent of Shareholders (15 Pa.C.S. § 905)
Institute for Continuing Healthcare Education, Inc.	Unanimous Consent of Shareholders (15 Pa.C.S. §1905)

6. ~~Strike out this paragraph if no foreign corporation/limited partnership is a party to the merger~~
 The plan was authorized, adapted or approved, as the case may be, by the foreign business/nonprofit corporation/limited partnership (or each of the foreign business/nonprofit corporations/limited partnerships) party to the plan in accordance with the laws of the jurisdiction in which it is incorporated/organized.

7. Check, and if appropriate complete one of the following

The plan of merger is set forth in full in Exhibit A attached hereto and made a part hereof

Pursuant to 15 Pa.C.S. § 1901/§ 8547(b) (relating to omission of certain provisions from filed plans) the provisions, if any, of the plan of merger that amend or constitute the operative provisions of the Articles of Incorporation/Certificate of Limited Partnership of the surviving corporation/limited partnership as in effect subsequent to the effective date of the plan are set forth in full in Exhibit A attached hereto and made a part hereof. The full text of the plan of merger is on file at the principal place of business of the surviving corporation/limited partnership, the address of which is:

Number and street	City	State	Zip	County

IN TESTIMONY WHEREOF, the undersigned corporation/limited partnership has caused these Articles/Certificate of Merger to be signed by a duly authorized officer thereof this

29th day of December

2004

CnMed Communications, Inc.
Name of Corporation/Limited Partnership

Thomas D. Paulis
Signature

CEO - principal
Title

Institute for Continuing Healthcare Education, Inc.
Name of Corporation/Limited Partnership

Thomas D. Paulis
Signature

CEO - principal
Title

002

PLAN OF MERGER

PLAN OF MERGER, dated this 29th day of December, 2004, pursuant to the Business Corporation Law of the Commonwealth of Pennsylvania, between INSTITUTE FOR CONTINUING HEALTHCARE EDUCATION, INC., a Pennsylvania corporation ("Merging Corporation"), COMED COMMUNICATIONS, INC., a Pennsylvania Corporation ("Surviving Corporation"), and VOX MEDICA, INC., a Pennsylvania corporation ("Parent").

BACKGROUND

Merging Corporation and Surviving Corporation are both wholly-owned subsidiaries of Parent. The corporations desire to merge Merging Corporation into Surviving Corporation.

NOW, THEREFORE, the corporations, parties to this Plan, in consideration of the mutual covenants, agreements and provisions hereinafter contained, do hereby prescribe the terms and conditions of said merger and mode of carrying the same into effect as follows:

FIRST: Surviving Corporation hereby merges into itself Merging Corporation and Merging Corporation shall be and hereby is merged into Surviving Corporation, which shall be the surviving corporation.

SECOND: The Articles of Incorporation of Surviving Corporation, as hereto amended and as in effect on the date of merger provided for in this Plan, shall continue in full force and effect as the Articles of Incorporation of the corporation surviving this merger.

THIRD: Each share of common stock of the Surviving Corporation, which shall be issued and outstanding on the effective date of this Plan, shall remain issued and outstanding.

FOURTH: The terms and conditions of the merger are as follows.

(a) The bylaws of the Surviving Corporation as they shall exist on the effective date of this Plan shall be and remain the bylaws of the Surviving Corporation until the same shall be altered, amended and repealed as therein provided.

(b) The directors and officers of the Surviving Corporation shall continue in office until the next annual meeting of stockholders and until their successors shall have been elected and qualified.

(c) This merger shall become effective on December 30, 2004 at 12:00 AM. with the Secretary of State of Pennsylvania.

(d) Upon the merger becoming effective, all the property, rights, privileges, franchises, patents, trademarks, licenses, registrations and other assets of every kind and description of the Merged Corporation shall be transferred to, vested in and devolve upon the Surviving Corporation without further act or deed and all property, rights, and every other interest of the Surviving Corporation and the Merged Corporation shall be as effectively the property of the Surviving Corporation as they were of the Surviving Corporation and the Merged Corporation respectively. The Merged Corporation hereby agrees from time to time, as and when requested by the Surviving Corporation or by its successors or assigns, to execute and deliver or cause to be executed and delivered all such deeds and instruments and to take or cause to be taken such further or other action as the Surviving Corporation may deem necessary or desirable in order to vest in and confirm to the Surviving Corporation title to and possession of any property of the Merged Corporation acquired or to be acquired by reason of or as a result of the merger herein provided for and otherwise to carry out the intent and purposes hereof and the proper officers and directors of the Merged Corporation and the proper officers and directors of the Surviving Corporation are fully authorized in the name of the Merged Corporation or otherwise to take any and all such action.

(e) Upon the merger becoming effective, the name of the Surviving Corporation shall be changed to "Institute for Continuing Healthcare Education, Inc.," and Surviving Corporation's articles of incorporation shall be amended to reflect such change.

FIFTH: Anything herein or elsewhere to the contrary notwithstanding, this Plan may be terminated and abandoned by the Board of Directors of any constituent corporation at any time prior to the date of filing this Plan with the Secretary of State. This Plan may be amended by the Board of Directors of its constituent corporations at any time prior to the date of filing this Plan with Secretary of State, provided that an amendment made subsequent to the adoption of the Plan by the stockholders of any constituent corporation shall not (1) alter or change the amount or kind of shares, securities, cash, property and/or rights to be received in exchange for or on conversion of all or any of the shares of any class or series thereof of such constituent corporation, (2) alter or change any term of the Certificate of Incorporation of the Surviving Corporation to be effected by the merger, or (3) alter or change any of the terms and conditions of the Plan if such alteration or change would adversely affect the holders of any class or series thereof of such constituent corporation.

IN WITNESS WHEREOF, the parties to this Plan, pursuant to the approval and authority duly given by resolutions adopted by their respective Boards of Directors and Shareholders, have caused these presents to be executed by the authorized officer of each party hereto as the respective act, deed and agreement of said corporations on this 29th day of December, 2004.

VOX MEDICA, INC.

By: [Signature]
Name: YVONNE D'AMELIO
Title: CEO & principal

COMED COMMUNICATIONS, INC.

By: [Signature]
Name: YVONNE D'AMELIO
Title: CEO & principal

INSTITUTE FOR CONTINUING
MEDICAL EDUCATION, INC.

By: [Signature]
Name: YVONNE D'AMELIO
Title: CEO & principal

**PENNSYLVANIA DEPARTMENT OF STATE
 CORPORATION BUREAU**

Statement of Change of Registered Office (15 Pa.C.S.)

- Domestic Business Corporation (§ 1507)
- Foreign Business Corporation (§ 4144)
- Domestic Nonprofit Corporation (§ 5507)
- Foreign Nonprofit Corporation (§ 6144)
- Domestic Limited Partnership (§ 8506)

Name _____
 Corporation Service Company _____
 KD

Document will be returned to the name and address you enter to the left.



Fee: \$70

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. (relating to corporations and unincorporated associations), the undersigned corporation or limited partnership, desiring to effect a change of registered office, hereby states that:

1. The name is: State ID #
 INSTITUTE FOR CONTINUING HEALTHCARE EDUCATION, INC. - STATE ID# 2559423

2. The (a) address of its initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and street	City	State	Zip	County
210 WEST WASHINGTON SQ,	PHILADELPHIA, PA		19106	(PHILADELPHIA COUNTY)

(b) Name of Commercial Registered Office Provider _____ County _____
 c/o: _____

3. Complete part (a) or (b):

(a) The address to which the registered office of the corporation or limited partnership in this Commonwealth is to be changed is:

The Curtis Center, Suite 250, Independence Square West, Philadelphia, PA 19106 (Philadelphia County)

Number and street	City	State	Zip	County

(b) The registered office of the corporation or limited partnership shall be provided by:

c/o: _____
 Name of Commercial Registered Office Provider _____ County _____

PA DEPT OF STATE
 2006 OCT 18 PM 4:35



4. *Strike out if a limited partnership:*

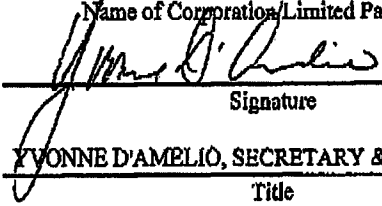
Such change was authorized by the Board of Directors of the corporation.

IN TESTIMONY WHEREOF, the undersigned has caused this Application for Registration to be signed by a duly authorized officer thereof this

17th day of OCTOBER, 2006.

INSTITUTE FOR CONTINUING HEALTHCARE EDUC

Name of Corporation/Limited Partnership



Signature

YVONNE D'AMELIO, SECRETARY & TREASURER

Title