

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNS THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Kaiser Foundation Health Plan, Inc.		03/21/2007	CORPORATION: CALIFORNIA
The Permanente Federation LLC		03/22/2007	LIMITED LIABILITY COMPANY: DELAWARE
RECEIVING PARTY DATA			
Name:	Archimedes, Inc.		
Street Address:	One Kaiser Plaza, 15th Floor		
City:	Oakland		
State/Country:	CALIFORNIA		
Postal Code:	94612		
Entity Type:	CORPORATION: CALIFORNIA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Serial Number:	78241285	ARCHIMEDES	
Serial Number:	78241288	ARCHIMEDES	
CORRESPONDENCE DATA			
Fax Number:	(206)628-7699		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	(206) 628-7733		
Email:	marshallnelson@dwt.com		
Correspondent Name:	Marshall J. Nelson		
Address Line 1:	Davis Wright Tremaine LLP		
Address Line 2:	1501 Fourth Avenue, Suite 2600		
Address Line 4:	Seattle, WASHINGTON 98101		
ATTORNEY DOCKET NUMBER:	41636-24		
NAME OF SUBMITTER:	Kristine Fyfe, Davis Wright Tremaine LLP		

CH \$65.00 78241285

Signature:	/kristinefyfe/
Date:	03/23/2007
Total Attachments: 4 source=ARCHIMEDES - Assignment - Kaiser Foundation Health Plan, Inc. signature#page1.tif source=ARCHIMEDES - Assignment - Kaiser Foundation Health Plan, Inc. signature#page2.tif source=ARCHIMEDES - Assignment - The Permanente Federation LLC signature#page1.tif source=ARCHIMEDES - Assignment - The Permanente Federation LLC signature#page2.tif	

TRADEMARK ASSIGNMENT

WHEREAS, Kaiser Foundation Health Plan, Inc. and The Permanente Federation LLC, whose addresses are both at One Kaiser Plaza, Oakland, California 94612 ("Assignors"), have adopted and are using the following trademark/service marks which are pending registration in the U.S. Patent & Trademark Office under the application serial numbers show, filed April 23, 2003:

ARCHIMEDES Serial No. 78241285

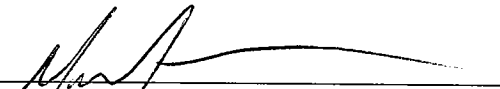
ARCHIMEDES Serial No. 78241288

WHEREAS, Archimedes, Inc., whose address is One Kaiser Plaza, 15th Floor, Oakland, California 94612 ("Assignee"), is successor to the portion of the ongoing and existing business of the applicants to which the marks pertain and wishes to acquire said trademark/service marks and applications;

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, Assignors do hereby assign to Assignee all right, title, and interest in and to the trademark/service marks and the pending applications identified above, together with the good will of the business symbolized thereby, effective as of November 3, 2005.

KAISER FOUNDATION HEALTH PLAN, INC.

By



THE PERMANENTE FEDERATION LLC

By _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

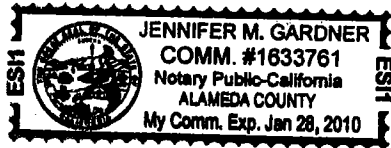
State of California }
County of Alameda } ss.

On March 21, 2007 before me, Jennifer M. Gardner, Notary Public
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared Mark Zemelman
Name(s) of Signer(s)

- personally known to me
- proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Jennifer M. Gardner
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Trademark Assignment

Document Date: _____ Number of Pages: 1

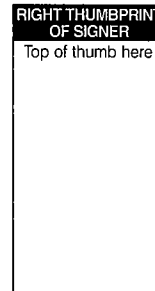
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: _____

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

Signer Is Representing: Kaiser Foundation Health Plan, Inc.



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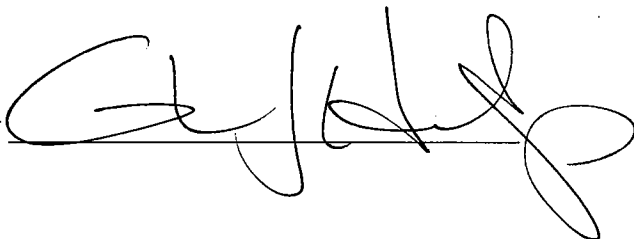
WHEREAS, Archimedes, Inc., whose address is One Kaiser Plaza, 15th Floor, Oakland, California 94612 ("Assignee"), is successor to the portion of the ongoing and existing business of the applicants to which the marks pertain and wishes to acquire said trademark/service marks and applications;

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, Assignors do hereby assign to Assignee all right, title, and interest in and to the trademark/service marks and the pending applications identified above, together with the good will of the business symbolized thereby, effective as of November 3, 2005.

KAISER FOUNDATION HEALTH PLAN, INC.

By _____

THE PERMANENTE FEDERATION LLC

By  _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

State of CALIFORNIA

County of ALAMEDA

On MARCH 22, 2007 before me, MELISSA M. COHEN, NOTARY PUBLIC
Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared GLEN HENTGES
Name(s) of Signer(s)

personally known to me -OR- proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Melissa M. Cohen
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

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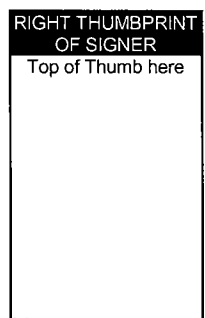
Document Date: _____ Number of Pages: ONE

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

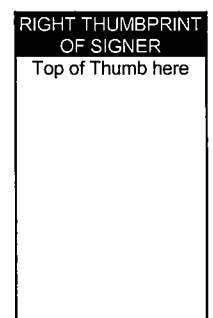
- Individual
- Corporate Officer
- Titles(s): _____
- Partner - Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____



Signer Is Representing: _____

Signer's Name: _____

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- Title(s): _____
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- Other: _____



Signer Is Representing: _____

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