

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
MobileCare 2U, LLC	FORMERLY Hallmark Dental Care, LLC	03/07/2007	LIMITED LIABILITY COMPANY: KANSAS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	MobileCare 2U, LLC		
<b>Street Address:</b>	5201 Johnson Drive, Suite 410		
<b>City:</b>	Mission		
<b>State/Country:</b>	KANSAS		
<b>Postal Code:</b>	66205		
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: KANSAS		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
Serial Number:	75743286	RESI-DENT	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	(913)362-1118		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
<b>Phone:</b>	913-362-1112		
<b>Email:</b>	tim.grasser@resi-dent.com		
<b>Correspondent Name:</b>	MobileCare 2U, LLC		
<b>Address Line 1:</b>	5201 Johnson Drive, Suite 410		
<b>Address Line 4:</b>	Mission, KANSAS 66205		
<b>NAME OF SUBMITTER:</b>	Paul MacCready		
<b>Signature:</b>	/Paul /MacCready		
<b>Date:</b>	05/25/2007		

OP \$40.00 75743286

Total Attachments: 1

**900077810**

**TRADEMARK  
 REEL: 003549 FRAME: 0479**



Change of name documents not needed for Resi-Dent trademark.