Form PTO-1594 (Rev. 07/05) OMB Collection 0651-0027 (exp. 6/30/2008)	U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office				
RECORDATION FORM COVER SHEET					
TRADEMARKS ONLY					
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):	2. Name and address of receiving party(ies)				
CONMED INTEGRATED SYSTEMS	Additional names, addresses, or citizenship attached?				
	Name: CONMED CORPORATION				
Individual(s) Association	Internal Address:				
General Partnership Limited Partnership	Street Address: 525 FRENCH ROAD				
Corporation- State: OREGON	City: UTICA				
Other	State: NEW YORK				
Citizenship (see guidelines)	Country: USA Zip: 13502				
Additional names of conveying parties attached? Yes V No	Association Citizenship				
3. Nature of conveyance)/Execution Date(s) :	General Partnership Citizenship				
Execution Date(s) 10//8/57	Limited Partnership Citizenship				
✓ Assignment Merger	Corporation Citizenship NEW YORK				
Security Agreement Change of Name	Citizenship If assignee is not domiciled in the United States, a domestic				
Other	representative designation is attached: Yes No				
4. Application number(s) or registration number(s) and	(Designations must be a separate document from assignment)				
A. Trademark Application No.(s) 78/849693	B. Trademark Registration No.(s)				
:	A de Per				
C. Identification or Description of Trademark(s) (and Filing	Additional sheet(s) attached? Yes No Date if Application or Registration Number is unknown):				
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5. Name & address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:				
Name: GENE WARZECHA	registrations involved: ONE				
Internal Address: LINVATEC CORPORATION	7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$_40.00				
· · · · · · · · · · · · · · · · · · ·	Authorized to be charged by credit card				
Street Address: 11311 CONCEPT BOULEVARD	Authorized to be charged to deposit account				
City: LARGO	8. Payment Information:				
State: FLORIDA Zip: 33773	a. Credit Card Last 4 Numbers Expiration Date				
Phone Number: <u>727 399 5295</u>	b. Deposit Account Number 12-1550				
Fax Number: 727 399 5477	Authorized User Name LINVATEC CORPORATION				
Email Address: GWARZECHA@LINVATEC.COM	LINVALEG CORPURATION				
9. Signature: Sunch Apricha Signature					
GENE WARZECHA	Date Total number of pages including cover				
Name of Person Signing sheet, allachments, and document:					

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

ASSIGNMENT

Whereas, ConMed Integrated Systems. a corporation of the State of New York, having a place of business at 1815 N.W. 169th Place, Portland, Oregon 97006 (hereinafter referred to as "ASSIGNOR"), owns the entire right, title and interest in certain trademark rights and has agreed to transfer such trademark assets, inclusive of the trademark assets identified below,

Whereas, Conmed Corporation, a corporation of the State of New York, having a place of business at 525 French Road, Utica, New York 13502 (hereinafter referred to as "ASSIGNEE") desires to acquire said trademark assets and the associated registrations,

Now, therefore, for good and valuable consideration the receipt of which is hereby acknowledged, ASSIGNOR has assigned and transferred, and by these presents does assign and transfer, to ASSIGNEE all of ASSIGNOR's right, title and interest in and to the following United States Trademarks:

Trademark	App. No.	Filing Date
SURGEON'S ASSISTANT	78/849693	3/30/06

IN WITNESS WHEREOF, ASSIGNOR has caused these presents to be signed by its Vice President

- Legal Affairs duly authorized this 18th day of October, 29007.

By_

Print Name: Daniel S. Jonas, Eyq.

Title: Vice President – Legal Affairs

State of New York

,) ss:

County of Oneida

On this 18th day of October, 2007 before me personally appeared Daniel S. Jonas, Esq. to me personally known, who, being by me duly sworn, did say that he/she is Vice President – Legal Affairs of ASSIGNOR, that said instrument was signed on behalf of said corporation by authority of its Board of Directors, and he/she acknowledged said instrument to be the free act and deed of said corporation.

Notary Public

MICHELE A. CAIOLA
Notary Public, State of New York
Appointed in Herkimer County
No.01CA5068679
Commission Expires November 4, 20/0

TRADEMARK REEL: 003644 FRAME: 0696 FAX: 727 399 5477

GENE WARZECHA LINVATEC CORPORATION 11311 CONCEPT BLVD LARGO, FL 33773 PHONE: 727 399 5295

CONMED LINVATEC CORPORATION



10:	Assignment branch	From:	[Click here and type # of pages]	
Fax:	571 273 0140	Pages:		
Phone:	[Click here and type phone number]	Date:	October 22, 2007	
Re:	[Click here and type subject of fax]	CC:		
Urgent	☐ For Review ☐ Please Co	omment	☐ Please Reply	☐ Please Recycle
• Comr	ments: [Click here and type comm	nents]		
Please	e record the attached Assignm	ent.		

Gene

RECORDED: 10/22/2007

TRADEMARK