Our Ref.: FPP-551-235

Form PTO-1594 1-31-92

# U.S. Department of Commerce Patent and Trademark Office RECORDATION FORM COVER SHEET

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	the Commissioner for Trademarks: Please record the attache Name of conveying party(ies): Axcan Scandipharm Inc.  Individual(s)  Association	ed original documents or copy thereof.  2. Name and address of receiving party(ies): Name: Axcan Pharma US, Inc. Internal Address: Street Address:  22 Inverness Center Parkway
	General partnership Limited Partnership	City: Birmingham
	☑ Corporation-State: Delaware	State/Country: Alabama
	Other:	Zip: 35242
3.	Nature of conveyance:  Correction to Reel/Frame: 003719/0214  Assignment Merger  Security Assignment Change of Name  Other: CORRECTION: Please change  "SCANDIPHARMA" to read  "SCANDIPHARM" as originally filed	Individual(s) citizenship  Association  General Partnership  Limited Partnership  Corporation-State Delaware  Other
		If assignee is not domiciled in the United States, a domestic representative designation is attached:   Yes  No
	Execution Date: February 11, 2008	Designations must be a separate document from Assignment) Additional name/s & address/es attached  Yes  No
4.	Application number(s) or registration number(s):	
Г	If this document is being filed together with a new application	n, the execution date of the application is:
	<ul> <li>A. Trademark Application No.(s)</li> <li>(1)</li> <li>(2)</li> <li>(3)</li> <li>Additional numbers attached</li> </ul>	B. Trademark Registration No.(s) (1) 1765728 (2) 1764007 (3) : ed? ☐ Yes ☒ No
5.	Name and address of party to whom correspondence	6. Total number of applications and registrations involved: 2
ļ .	concerning document should be mailed:	
	Name: Frank P. Presta	7. Total fee (37 CFR 3.41)(8521; \$40) (8522; \$25)\$ 65.00
	Internal Address:	☐ Enclosed
	Charat Address Niver 9 Vandarhus D.C.	Authorized to be charged to deposit account #14-1140
	Street Address: Nixon & Vanderhye P.C. 901 North Glebe Road	*** CORRECTION – DEP ACCT ALREADY CHARGED  8. The Commissioner is hereby authorized to charge any
	11th Floor	deficiency, or credit any overpayment, in the fee(s) filed, or
	City Arlington State: VA Zip: 22203	asserted to be filed, or which should have been filed herewith
		(or with any paper thereafter filed in this application by this firm) to our <b>Account No. 14-1140</b> .
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9.	Statements and signature.	
	To the best of my knowledge and belief, the foregoing information copy of the original document.	ation is true and correct and any attached copy is a true
	Frank P. Presta	February 27, 2008
	Name of Person Signing Signa	ature Date
	Total number of pages inc	cluding cover sheet, attachments and document:

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): FRANK P. PRESTA COMPANY: NIXON & VANDERHYE P.C.

NIXON & VANDERHYE PC2 Fax: 703-915-412008 1-00m P10-1594 1-31-92

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To the Commissioner for Trademarks: Please record the attex  1. Name of conveying party(les):  Axcan Scandipharm inc.	Name and address of receiving party(lee): Name: Axcan Pharma US, Inc. Internal Address:			
☐ Individual(s) ☐ Association ☐ General partnership ☐ Limited Partnership ☐ Corporation-State: Delaware ☐ Other:	Street Address: 22 Inverness Center Parkway  City: Birmingham  State/Country: Alabama  Zip: 36242			
3. Nature of conveyance:  Assignment Merger  Security Assignment Change of Name  Other:	Individual(a) citizenship  Association General Partnership Limited Partnership Corporation-State Delaware Other			
Execution Date: February 11, 2008	If assigned is not domicited in the United States, a domestic representative designation is attached:   Designations must be a separate document from Assignment)			
4. Application number(s) or registration number(s):	Additional name/s & address/es attached  Yes  No			
If this document is being filed together with a new application.  A. Trademark Application No.(s)  (1)	6. Trademark Registration No.(a)			
(2) (3)	(1) 1766728 (2) 1764007 (3)			
Additional numbers attach	ied? Yes 🛭 No			
Name and address of party to whom correspondence concerning document should be mailed:  Name: Frank P. Presta	Cotal number of applications and registrations involved:     Total fee (27 CER 0 deliver)			
Internal Address:	7. Total fee (37 CFR 3.41)(8521; \$40) (8522; \$25)\$ 65.00			
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City Anington State: VA Zip; 22203	8. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this film) to our Account No. 14-1149.			
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## NO ADDITIONAL DOCUMENTS REQUIRED FOR CHANGE OF NAME

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FEBRUARY 14, 2008

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FRANK P. PRESTA NIXON & VANDERHYE P.C. 901 NORTH GLEBE ROAD 11TH FLOOR ARLINGTON, VA 22203

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BRIEF: CHANGE OF NAME

ASSIGNOR:

AXCAN SCANDIPHARMA INC.

DOC DATE: 02/11/2008 CITIZENSHIP: DELAWARE ENTITY: CORPORATION

**ASSIGNEE:** 

AXCAN PHARMA US, INC. 22 INVERNESS CENTER PARKWAY BIRMINGHAM, ALABAMA 35242

CITIZENSHIP: DELAWARE ENTITY: CORPORATION

APPLICATION NUMBER: 74275598 REGISTRATION NUMBER: 1765728

FILING DATE: 05/15/1992 ISSUE DATE: 04/20/1993

MARK: SCANDIPHARM

DRAWING TYPE: WORDS, LETTERS, OR NUMBERS IN TYPED FORM

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MARK: SCANDIPHARM

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