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U.S. DEPARTMENT OF COMMERCE  
and States Patent and Trademark Office

3-26-08

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ments or the new address(es) below.

**1. Name of conveying party(ies):**

ClearChoice Dental Implant Services LLC

- Individual(s)
- General Partnership
- Corporation- State: \_\_\_\_\_
- Other Colorado limited liability company

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached?  Yes  No

**3. Nature of conveyance )/Execution Date(s) :**

Execution Date(s) \_\_\_\_\_

- Assignment
- Security Agreement
- Other \_\_\_\_\_
- Merger
- Change of Name

**2. Name and address of receiving party(ies)**

Additional names, addresses, or citizenship attached?  Yes  No

Name: ClearChoice Holdings LLC

Internal Address: Suite 100

Street Address: 8350 East Crescent Parkway

City: Greenwood Village

State: Colorado

Country: United States Zip: 80111

Association Citizenship \_\_\_\_\_

General Partnership Citizenship \_\_\_\_\_

Limited Partnership Citizenship \_\_\_\_\_

Corporation Citizenship \_\_\_\_\_

Other Colorado LLC Citizenship \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
(Designations must be a separate document from assignment)

**4. Application number(s) or registration number(s) and identification or description of the Trademark.**

A. Trademark Application No. (s)

B. Trademark Registration No. (s)

3,181,966; 3,225,921

Additional sheet(s) attached?  Yes  No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

CLEARCHOICE; CLEARCHOICE DENTAL IMPLANTS

**5. Name & address of party to whom correspondence concerning document should be mailed:**

Name: Mark Chretien

Internal Address: Greenberg Traurig LLP

Suite 1800

Street Address: 1000 Louisiana Street

City: Houston

State: Texas Zip: 77002

Phone Number: 713-374-3528

Fax Number: 713-754-7528

Email Address: chretienm@gtlaw.com

**6. Total number of applications and registrations involved:**

2

**7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$65.00**

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

**8. Payment Information:**

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_

b. Deposit Account Number 50-2638-102232.010200

Authorized User Name Mark G. Chretien

**9. Signature:**

*Mark G. Chretien*  
Signature

03/24/08  
Date

Mark G. Chretien  
Name of Person Signing

03/26/2008 DBYRNE 0000071 502638 3181966  
Total number of pages including cover sheet: 3  
01 Fee Attachments, and Document: 0000  
02 FC-A522 25 00 DA

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, ClearChoice Dental Implant Services, LLC ("CCDIS"), a Colorado limited liability company currently located and doing business at 8350 East Crescent Parkway, Suite 100, Greenwood Village, Colorado, 80111, is the owner of the U.S. Service Mark Registrations listed in Schedule A hereto;

WHEREAS, ClearChoice Holdings, LLC ("CCH"), a Colorado limited liability company currently located and doing business at 8350 East Crescent Parkway, Suite 100, Greenwood Village, Colorado, 80111, desires to acquire all of CCDIS's right, title and interest in and to the U.S. Service Mark Registrations listed in Schedule A hereto;

NOW, THEREFORE, in consideration of and in exchange for the sum of Ten Dollars, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, CCDIS does hereby sell, assign, and transfer unto CCH the entire right, title, and interest in and to the U.S. Service Mark Registrations listed in Schedule A hereto, together with the goodwill of the business in connection with which the U.S. Service Mark Registrations listed in Schedule A hereto have been used.

By: Donald Miloni  
Printed Name: Donald Miloni  
Title: Managing Partner  
Date: 3/11/08

THE STATE OF Colorado  
COUNTY OF Arapahoe

BEFORE ME, the undersigned authority, on this 11<sup>th</sup> day of March, 2008, personally appeared Donald Miloni, an officer of ClearChoice Dental Implant Services, LLC, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same of his own free will for the purposes and consideration therein expressed, and that he was authorized to execute the foregoing instrument on behalf of ClearChoice Dental Implant Services, LLC.

GIVEN under my hand and seal of office this 11<sup>th</sup> day of March, 2008.

Ann Ishmael  
NOTARY PUBLIC, STATE OF Colorado

**Schedule A**  
**Service Mark Registrations**

<b>Mark</b>	<b>Reg. No.</b>	<b>Reg. Date</b>	<b>App. No.</b>	<b>App. Date</b>	<b>Services</b>
CLEARCHOICE	3,181,966	12/05/06	78/694,863	08/17/05	"Dental services, namely dental implant services."
CLEARCHOICE DENTAL IMPLANTS	3,225,921	04/03/07	78/694,876	08/17/05	"Dental services, namely dental implant services."