

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	06/27/2008

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Corr-Jensen Labs Inc.		06/26/2008	CORPORATION: COLORADO

**RECEIVING PARTY DATA**

Name:	Evolution Pharmaceuticals, Inc.
Street Address:	6341 S. Troy Circle
Internal Address:	Suite E
City:	Centennial
State/Country:	COLORADO
Postal Code:	80111
Entity Type:	CORPORATION: COLORADO

**PROPERTY NUMBERS Total: 10**

Property Type	Number	Word Mark
Serial Number:	77503572	[TD] TRAINING DAY
Serial Number:	77503585	POST GAME
Serial Number:	77503584	PRE SEASON
Serial Number:	77503579	GAME TIME
Serial Number:	77403912	THERMOGENIC PUSH
Serial Number:	77403908	REVOLUTION CORR-JENSEN LABS
Serial Number:	77403900	ABDOMINAL CUTS
Serial Number:	77403894	TESTOSTERONE PUSH
Serial Number:	77468352	TRAINING DAY
Serial Number:	77114330	CORR-JENSEN LABS EVOLUTION

**CORRESPONDENCE DATA**

OP \$265.00 77503572

Fax Number: (303)223-0988  
*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*  
Phone: 303.223.1188  
Email: bplotkin@bhfs.com  
Correspondent Name: Bruce L. Plotkin  
Address Line 1: 410 Seventeenth Street  
Address Line 2: Suite 2200  
Address Line 4: Denver, COLORADO 80202

ATTORNEY DOCKET NUMBER:	12358.1 7/1/08 DRS
NAME OF SUBMITTER:	Bruce L. Plotkin
Signature:	/bruceplotkin/
Date:	07/01/2008

Total Attachments: 5  
source=Merger#page1.tif  
source=Merger#page2.tif  
source=Merger#page3.tif  
source=Merger#page4.tif  
source=Merger#page5.tif

Document processing fee  
If document is filed on paper \$150.00  
If document is filed electronically Currently Not Available

Fees & forms/cover sheets are subject to change.  
To file electronically, access instructions for this form/cover sheet and other information or print copies of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us) and select Business Center.

20081346249 C  
\$ 300.00  
SECRETARY OF STATE  
06-27-2008 14:23:10

Paper documents must be typewritten or machine printed.

ABOVE SPACE FOR OFFICE USE ONLY

**Statement of Merger**  
**(Surviving Entity is a Domestic Entity)**  
filed pursuant to § 7-90-203.7 of the Colorado Revised Statutes (C.R.S.)

1. For each merging entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

<b>ID Number</b>	<u>20081077052</u> <i>(Colorado Secretary of State ID number)</i>
<b>Entity name or true name</b>	<u>Corr-Jensen Labs Inc.</u>
<b>Form of entity</b>	<u>Corporation</u>
<b>Jurisdiction</b>	<u>Colorado</u>
<b>Street address</b>	<u>6431 S Troy Circle, Suite E</u> <i>(Street number and name)</i>
	<u>Centennial</u> <u>CO</u> <u>80111</u> <i>(City) (State) (ZIP/Postal Code)</i>
	<u></u> <u>USA</u> <i>(Province - if applicable) (Country)</i>
<b>Mailing address</b> (leave blank if same as street address)	<u></u> <i>(Street number and name or Post Office Box information)</i>
	<u></u> <u></u> <u></u> <i>(City) (State) (ZIP/Postal Code)</i>
	<u></u> <u></u> <i>(Province - if applicable) (Country)</i>

---

<b>ID Number</b>	<u></u> <i>(If filed Secretary of State)</i>
<b>Entity name or true name</b>	<u></u>
<b>Form of entity</b>	<u></u>

Jurisdiction \_\_\_\_\_

Street address \_\_\_\_\_

(Street number and name)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

ID Number \_\_\_\_\_

(Colorado Secretary of State ID number)

Entity name or true name \_\_\_\_\_

Form of entity \_\_\_\_\_

Jurisdiction \_\_\_\_\_

Street address \_\_\_\_\_

(Street number and name)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- There are more than three merging entities and the ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and the principal address of each additional merging entity is stated in an attachment.

2. For the surviving entity, its entity ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID Number 20071382686  
*(Colorado Secretary of State ID number)*

Entity name or true name Evolution Pharmaceuticals, Inc.

Form of entity Corporation

Jurisdiction Colorado

Street address 6341 S Troy Circle, Suite E  
*(Street number and name)*

Centennial CO 80111  
*(City) (State) (ZIP/Postal Code)*

USA  
*(Province - if applicable) (Country)*

Mailing address  
*(leave blank if same as street address)*   
*(Street number and name or Post Office Box information)*

*(City) (State) (ZIP/Postal Code)*

*(Province - if applicable) (Country)*

3. Each merging entity has been merged into the surviving entity.

4. *(If the following statement applies, adopt the statement by marking the box.)*

The plan of merger provides for amendments to a constituent filed document of the surviving entity and an appropriate statement of change or other document effecting the amendments will be delivered to the Secretary of State for filing pursuant to Part 3 of Article 90 of Title 7, C.R.S.

5. *(If the following statement applies, adopt the statement by marking the box and state the appropriate document number(s).)*

One or more of the merging entities is a registrant of a trademark described in a filed document in the records of the secretary of state and the document number of each filed document is

Document number \_\_\_\_\_

Document number \_\_\_\_\_

Document number \_\_\_\_\_

*(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

There are more than three trademarks and the document number of each additional trademark is stated in an attachment.

6. *(If applicable, adopt the following statement by marking the box and include an attachment.)*

This document contains additional information as provided by law.

7. *(Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)*

*(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)*

The delayed effective date and, if applicable, time of this document are \_\_\_\_\_  
*(mm/dd/yyyy hour:minute am/pm)*

**Notice:**

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

8. The true name and mailing address of the individual causing this document to be delivered for filing are

<u>Nyberg</u>	<u>Matthew</u>	<u>Richard</u>	
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>Brownstein Hyatt Farber Schreck, LLP</u>			
<small>(Street number and name or Post Office Box information)</small>			
<u>410 Seventeenth Street, Suite 2200</u>			
<u>Denver</u>	<u>CO</u>	<u>80202</u>	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
	<u>USA</u>		
<small>(Province - if applicable)</small>	<small>(Country)</small>		

*(If applicable, adopt the following statement by marking the box and include an attachment.)*

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

**Disclaimer:**

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).

**ATTACHMENT  
TO  
STATEMENT OF MERGER**

**Corr-Jensen Labs Inc., a Colorado corporation, as merging entity  
with  
Evolution Pharmaceuticals, Inc., as surviving entity**

Evolution Pharmaceuticals, Inc. ("Surviving Entity") will file the Amended and Restated Articles of Incorporation with the Colorado Secretary of State immediately following the effectiveness of this Statement of Merger. The Amended and Restated Articles of Incorporation will include a name change, changing the name of the Surviving Entity from Evolution Pharmaceuticals, Inc. to Corr-Jensen Labs, Inc.

12358\1\170732.1