

## TIS/MADRID ASSIGNMENT

Electronic Version v1.0

Stylesheet Version v1.0

SUBMISSION TYPE:	NEW ASSIGNMENT	<b>APPLICATION NUMBER</b> <b>79018455</b>
NATURE OF CONVEYANCE:	CHANGE OF NAME	
CONVEYING PARTY DATA		
Name		Execution Date
Mölnlycke Health Care AB		04/04/2008
RECEIVING PARTY DATA		
Name:	Mölnlycke Health Care AB	
Address:	Gamlestadsvägen 3C SE-402 52 Göteborg	
Country:	SE	
Entity Type:		
Entity Country:	SE	
CORRESPONDENCE DATA		
Correspondent Name:	Mölnlycke Health Care AB	
Address:	Gamlestadsvägen 3C SE-402 52 Göteborg	
Country:	SE	

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