

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Silverleaf Medical Products, Inc.		08/06/2008	CORPORATION: DELAWARE

RECEIVING PARTY DATA

Name:	Vomrais Innovations, Inc.
Street Address:	3011 W. Ray Road, Suite 148
City:	Chandler
State/Country:	ARIZONA
Postal Code:	85226
Entity Type:	CORPORATION: DELAWARE

PROPERTY NUMBERS Total: 12

Property Type	Number	Word Mark
Serial Number:	78974297	PROSIT
Serial Number:	78972837	PROSIT
Serial Number:	78972820	PROSIT
Serial Number:	78752455	SILVERLEAF MEDICAL PRODUCTS
Serial Number:	78752445	SILVERLEAF MEDICAL PRODUCTS
Serial Number:	78752442	THE BATTERY
Serial Number:	78752434	THE BATTERY
Serial Number:	78752427	CMB
Serial Number:	78752422	CMB
Serial Number:	77510397	PROCELLERA
Serial Number:	77510370	PROCELLERA
Serial Number:	77510270	PROCELLERA

CORRESPONDENCE DATA

CH \$315.00 78974297

Fax Number: (602)852-5499
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
Phone: 6028525500
Email: uspto@hoolawgroup.com
Correspondent Name: Jennifer L. Lefere
Address Line 1: 2398 E. Camelback Road, Suite 1020
Address Line 4: Phoenix, ARIZONA 85016

ATTORNEY DOCKET NUMBER:	VOMARIS NAME CHANGES
NAME OF SUBMITTER:	Jennifer L. Lefere
Signature:	/Jennifer L. Lefere/
Date:	09/10/2008
Total Attachments: 2 source=Trademark Recordation Cover Sheet#page1.tif source=Trademark Recordation Cover Sheet#page2.tif	

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
Silverleaf Medical Products, Inc.

Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State Delaware
 Other _____

Additional name(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies)
Name: Vomaris Innovations, Inc.
Internal _____
Address: _____
Street Address: 3100 W. Ray Road, Suite 148
City: Chandler State: AZ Zip: 85226

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
(Designations must be a separate document from assignment)
Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other _____

Execution Date: 08/06/08

4. Application number(s) or registration number(s):
A. Trademark Application No.(s) 78974297, 78972837
78972820, 78752455, 78752445, 78752442

B. Trademark Registration No.(s) _____

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:
Name: Hool Law Group, PLC
Internal Address: Attn: Jennifer L. Lefere


Street Address: 2398 E. Camelback Road
Suite 1020
City: Phoenix State: AZ Zip: 85016

6. Total number of applications and registrations involved: 12

7. Total fee (37 CFR 3.41).....\$ 315.00
 Enclosed
 Authorized to be charged to deposit account

8. Deposit account number:
504602

DO NOT USE THIS SPACE

9. Signature.
Jennifer L. Lefere _____
Name of Person Signing  Signature August 6, 2008 Date
Total number of pages including cover sheet, attachments, and document: 2

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

Attachment to Recordation Cover Sheet for name change from Silverleaf Medical Products, Inc. to Vomaris Innovations, Inc. Additional trademark application numbers listed below:

78752434

78752427

78752422

77510397

77510370

77510270