

5/4/09

05-05-2009

Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/3)		EET Y		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
Tab settings ⇌⇌⇌		103559138		▼ ▼ ▼	
To the Honorable Comm. attached original documents or copy thereof.					
1. Name of conveying party(ies): MasterCPR, LLC <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation-State <input checked="" type="checkbox"/> Other <u>Oregon Limited Liability Company</u>			2. Name and address of receiving party(ies) Name: <u>Annuvia</u> Internal Address: Street Address: <u>1725 Clay St., Ste 100</u> City: <u>San Francisco</u> State: <u>CA</u> Zip: <u>94109</u> <input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <u>California</u> <input type="checkbox"/> Other		
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No			If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: <u>April 11, 2008</u>					
4. Application number(s) or registration number(s): A. Trademark Application No.(s) <u>77440579</u>			B. Trademark Registration No.(s) Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>William D. Evers</u> Internal Address: Street Address: <u>1725 clay street</u> <u>Ste. 100</u> City: <u>San Francisco</u> State: <u>CA</u> Zip: <u>94109</u>			6. Total number of applications and registrations involved: <input type="checkbox"/> 1		
			7. Total fee (37 CFR 3.41): \$ <u>4000</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account		
			8. Deposit account number: <small>05/04/2009 DBYRNE 00000014 77440579</small> (Attach duplicate copy of this page if paying by deposit account)		
DO NOT USE THIS SPACE					
9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. <u>Joseph Novello IV</u> <u>[Signature]</u> <u>March 23, 2009</u> Name of Person Signing Signature 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

ANNUVIA

1725 Clay Street, Suite 100

San Francisco, CA 94109

Tel: 415-202-0906

FAX: 866-364-7940

Email: bevers@annuvia.com

March 24, 2009

Commissioner of Patents and Trademarks
Box Assignments
Washington, DC 20231

Re Serial Number 77440579

Trademark: Annuvia

MasterCPR,LLC- Assignment to Annuvia – Form enclosed

Dear Commissioner:

The undersigned is General Counsel for Annuvia. It will obvious that I am not a patent/trademark lawyer. However, I am also the Chair of Annuvia and address you in that capacity.

We are the Assignee of MasterCPR, LLC and acquired all of its assets and liabilities and management in 2008.

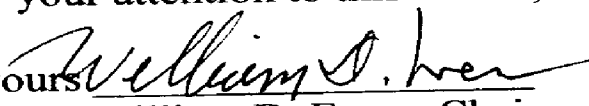
We will be filing with the USPTO a Revocation of Attorney in order to respond to and revive our Abandoned Application ourselves without the expense of the attorneys.

We are also filing a Change of Owner's Address (Copy of form enclosed) once the enclosed Recordation Form is filed.

Finally, please address any future correspondence to the undersigned at the above address.

Thank you for your attention to this matter,

Very truly yours,


William D. Evers, Chair

Assignment

MasterCPR, LLC to Annuvia

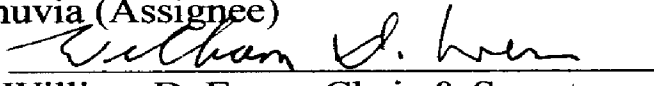
This Assignment is entered into as of the 11th day of April, 2008, wherein MasterCPR, LLC, an Oregon Limited Liability Company, hereby assigns to Annuvia, a California corporation, all of its right title and interest in and to the trademark and its Trademark Application (Serial Number 77440579) covering the trademark "Annuvia."

This assignment is made in consideration of the terms and conditions of that certain Exchange Agreement entered into by the parties as of the date hereof wherein it is agreed that this assignment would be made.

MasterCPR, LLC (Assignor)

By: 
Joseph Novello IV, Managing Member

Annuvia (Assignee)

By: 
William D. Evers, Chair & Secretary

copy

CHANGE OF OWNER'S ADDRESS

Serial Number: 7744059

Trademark: Annuvia

Owner: Annuvia, a California corporation

New Address:

1725 Clay Street, Suite 100

San Francisco, CA 94109

Tel & FAX 866-364-7940

Annuvia, as the Assignee of the prior owner, MasterCPR, LLC (the Assignor), has filed a form for "Revocation of Attorney" and has chosen to prosecute this Trademark Application on its own, therefore, the Owner's address and the correspondence address are identical.

Name of person submitting this document: William D. Evers,
Chair & General Counsel of Annuvia.

To the best of my knowledge and belief, the information contained above is true and correct.

March , 2009

William D. Evers