

TRADEMARK ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNS THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Northstar Healthcare Holdings Limited		09/04/2009	CORPORATION: IRELAND
RECEIVING PARTY DATA			
Name:	McKesson Corporation		
Street Address:	One Post Street		
Internal Address:	Law Dept. 33rd Floor		
City:	San Francisco		
State/Country:	CALIFORNIA		
Postal Code:	94104		
Entity Type:	CORPORATION: DELAWARE		
PROPERTY NUMBERS Total: 22			
Property Type	Number	Word Mark	
Registration Number:	2290445	FLUFF-E	
Registration Number:	2300415	PRETECT	
Registration Number:	2517679	SATIN STRETCH	
Registration Number:	2300416	PRETECT	
Registration Number:	2243597	EQ-U-MED	
Registration Number:	2243602	EQ-U-MED	
Registration Number:	2520425	EQ-U-MED	
Registration Number:	2393979	ISOSAFE	
Registration Number:	2474832	SYNTRILE	
Registration Number:	2423856	CYPRESS PLUS PFT	
Registration Number:	2300004	GENESIS	
Registration Number:	2429170	NEXT GENERATION GLOVES	
Registration Number:	2451560	CYPRESS PLUS	

OP \$565.00 2290445

900144046

TRADEMARK
REEL: 004069 FRAME: 0220

Registration Number:	2447713	PROSERIES
Registration Number:	2421280	CODEBLUE
Registration Number:	2421339	CODEBLUE PF
Registration Number:	2523418	TRILON
Registration Number:	2523495	MC3
Registration Number:	2750794	PROKITS
Registration Number:	2840769	FOOD GUARD
Registration Number:	2993145	CRYSTALVUE
Registration Number:	3338990	EVERFRESH

CORRESPONDENCE DATA

Fax Number: (415)983-9369

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 415 983 8323

Email: nina.steinman@mckesson.com

Correspondent Name: Nina Steinman

Address Line 1: One Post Street

Address Line 2: Law Dept. 33rd Floor

Address Line 4: San Francisco, CALIFORNIA 94104

ATTORNEY DOCKET NUMBER:	CYPRESS MARKS NOSR TO MCK
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NAME OF SUBMITTER:	Nina Steinman
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Signature:	/ninasteinman/
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Date:	09/25/2009
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Total Attachments: 4

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source=Cypress trademarks from NS to McK#page4.tif

TRADEMARK ASSIGNMENT

WHEREAS, Northstar Healthcare Holdings Limited, an Ireland corporation with Bermuda registration, having its principal place of business at Codan Service Limited, Claredon House, 2 Church Street, Hamilton HM 112, Bermuda, is the owner of the trademarks and registrations thereof, set forth on Schedule A attached hereto.

WHEREAS, McKesson Corporation, a Delaware corporation, having its principal place of business at One Post Street, San Francisco, California 94104 is desirous of acquiring said trademarks and registrations thereof.

NOW THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, Northstar Healthcare Holdings Limited does hereby assign unto McKesson Corporation, all right, including common law rights, title and interest to said trademarks together with the goodwill of the business symbolized by said trademarks, and applications and registrations thereof.

NORTHSTAR HEALTHCARE HOLDINGS
LIMITED

By: 

Name: Nicholas A. Loiacono

Title: Director

Date: September 4, 2009

MCKESSON CORPORATION

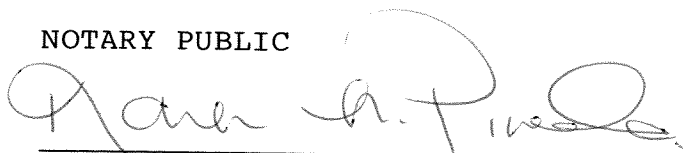
By: 

Name: Nina Steinman

Title: Assistant Secretary

Date: September 4, 2009

NOTARY PUBLIC



Karen M. Pineda

9/4/2009

PLEASE SEE ATTACHED
ACKNOWLEDGMENT

SCHEDULE A

Trademark	App. or Reg. No.	File Date or Reg. Date
FLUFF-E	2,290,445	11/2/1999
PRETECT	2,300,415	12/14/1999
SATIN STRETCH	2,517,679	12/11/2001
PRETECT	2,300,416	12/14/1999
EQ-U-MED	2,243,597	5/4/1999
EQ-U-MED	2,243,602	5/4/1999
EQ-U-MED	2,520,425	12/18/2001
ISOSAFE	2,393,979	10/10/2000
SYNTRILE	2,474,832	8/7/2001
CYPRESS PLUS PFT	2,423,856	1/23/2001
GENESIS	2,300,004	12/14/1999
NEXT GENERATION GLOVES	2,429,170	2/20/2001
CYPRESS PLUS	2,451,560	5/15/2001
PROSERIES	2,447,713	5/1/2001
CODEBLUE	2,421,280	1/16/2001
CODEBLUE PF	2,421,339	1/16/2001
TRILON	2,523,418	12/25/2001
MC3	2,523,495	12/25/2001
PROKITS	2,750,794	8/12/2003
FOOD GUARD	2,840,769	5/11/2004
CRYSTALVALUE	2,993,145	9/6/2005
EVERFRESH	3,338,990	11/20/2007

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of San Francisco

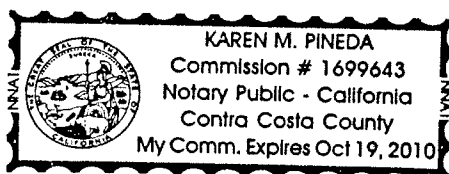
On September 4, 2009
Date

before me,

Karen M. Pineda, Notary Public
Here Insert Name and Title of the Officer

personally appeared

Nicholas A. Loiacono
Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person~~(s)~~ whose name~~(s)~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that ~~he~~~~she~~~~they~~ executed the same in ~~his~~~~her~~~~their~~ authorized capacity~~(ies)~~, and that by ~~his~~~~her~~~~their~~ signature~~(s)~~ on the instrument the person~~(s)~~ or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Trademark Assignment - Northstar Healthcare Holdings Limited

Document Date: September 4, 2009

Number of Pages: 2 pages

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: Nina Steinman

☐ Individual

☒ Corporate Officer — Title(s): Assistant Secretary

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____

McKesson Corporation

Signer's Name: _____

☐ Individual

☐ Corporate Officer — Title(s): _____

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of San Francisco

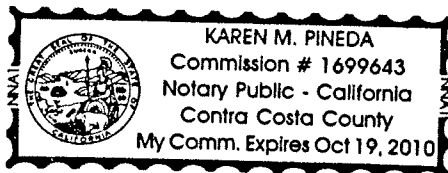
On September 4, 2009
Date

before me,

Karen M. Pineda, Notary Public
Here Insert Name and Title of the Officer

personally appeared

Nicholas A. Loiacono
Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person~~(s)~~ whose name~~(s)~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~(s)~~ on the instrument the person~~(s)~~ or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

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Capacity(ies) Claimed by Signer(s)

Signer's Name: Nicholas A. Loiacono

☐ Individual

☒ Corporate Officer — Title(s): VP and Treasurer

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____

Northstar Healthcare Holdings Limited

Signer's Name: _____

☐ Individual

☐ Corporate Officer — Title(s): _____

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____