

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Affidavit of Inadvertent Error in Trademark Ownership Name		
<b>CONVEYING PARTY DATA</b>			
Name	Formerly	Execution Date	Entity Type
Medimpact		10/05/2009	CORPORATION: CALIFORNIA
<b>RECEIVING PARTY DATA</b>			
Name:	Medimpact Healthcare Systems, Inc.		
Street Address:	10680 Treena Street, 5th Floor		
City:	San Diego		
State/Country:	CALIFORNIA		
Postal Code:	92131		
Entity Type:	CORPORATION: CALIFORNIA		
<b>PROPERTY NUMBERS Total: 1</b>			
Property Type	Number	Word Mark	
Registration Number:	3157180	MEDCARE USA POWERED BY MEDIMPACT	
<b>CORRESPONDENCE DATA</b>			
Fax Number:	(619)696-7124		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	619 696-6700		
Email:	ipdocket@gordonrees.com		
Correspondent Name:	Susan B. Meyer		
Address Line 1:	101 West Broadway - 16th Floor		
Address Line 4:	San Diego, CALIFORNIA 92101		
ATTORNEY DOCKET NUMBER:	BMIMP 1039248		
NAME OF SUBMITTER:	David Wheeler		
Signature:	/David Wheeler/		
Date:	10/12/2009		

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Total Attachments: 1  
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**AFFIDAVIT OF INADVERTENT ERROR IN  
TRADEMARK OWNERSHIP NAME**

WHEREAS Medimpact Healthcare Systems, Inc., a California Corporation, located at 10680 Treena Street, 5<sup>th</sup> Floor, San Diego, California 92131 is the owner of the following trademark registered at the United States Patent and Trademark Office:

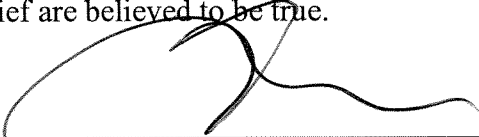
MEDCARE USA POWERED BY MEDIMPACT Reg. No. 3,157,180

WHEREAS the applications for the above-referenced marks were filed with the following entity listed as the owner: "Medimpact." This designation of ownership was an inadvertent mistake. The correct name of the owner of the above-referenced marks is "Medimpact Healthcare Systems, Inc."

The mistake was inadvertent and without intent to mislead or give false information.

The undersigned, being hereby warned that willful false statements and the like so made are punishable by fine or imprisonment, under 18 U.S.C. § 1001, and that such willful false statements and the like may jeopardize the validity of the application or document or any resulting registration, declares that the facts set forth in this application are true; all statements made of his/her own knowledge are true; and all statements made on information and belief are believed to be true.

Date: 10/5/09

  
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Signature of Officer of MedImpact Healthcare Systems, Inc.

DAVID WHEELER, CFO  
\_\_\_\_\_  
Print or Type Name and Position