

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	01/01/2009

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
RehabWorks, LLC		12/10/2008	LIMITED LIABILITY COMPANY: DELAWARE

**RECEIVING PARTY DATA**

Name:	RehabCare Group East, Inc.
Street Address:	7733 Forsyth Boulevard
City:	St. Louis
State/Country:	MISSOURI
Postal Code:	63105
Entity Type:	CORPORATION: DELAWARE

**PROPERTY NUMBERS Total: 8**

Property Type	Number	Word Mark
Registration Number:	3041345	REHABPLUS
Registration Number:	3035587	THE RIGHT COMPANY THE RIGHT PEOPLE THE RIGHT BENEFITS + THE RIGHT TRAINING = THE RIGHT CHOICE
Registration Number:	3028649	REHABWORKINGS
Registration Number:	3035456	THE RIGHT PEOPLE THE RIGHT TRAINING THE RIGHT DIRECTION + THE RIGHT RESOURCES THE RIGHT RESULTS
Registration Number:	3040955	PASSIONATE PEOPLE PROVIDING POWERFUL PROGRAMS
Registration Number:	3045559	THE RIGHT DIRECTION
Registration Number:	3045558	RECAPTURE THE STRENGTH: A SENIOR WELLNESS PROGRAM
Registration Number:	3040911	REHAB WITH RESULTS!

**CORRESPONDENCE DATA**

**900152819**

**TRADEMARK  
 REEL: 004136 FRAME: 0111**

**CH \$215.00 3041345**

Fax Number: (314)667-3633  
*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*  
Phone: 314.552.6000  
Email: ipdocket@thompsoncoburn.com  
Correspondent Name: Tiffany L. Schwartz  
Address Line 1: One US Bank Plaza  
Address Line 4: St. Louis, MISSOURI 63101

ATTORNEY DOCKET NUMBER:	5310-85756
NAME OF SUBMITTER:	Tiffany L. Schwartz
Signature:	/Tiffany L. Schwartz/
Date:	01/22/2010

Total Attachments: 2  
source=Merger\_RehabCare Group East#page1.tif  
source=Merger\_RehabCare Group East#page2.tif

# Delaware

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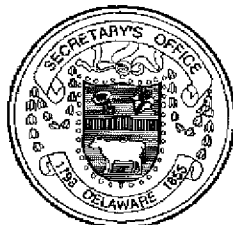
*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"REHABWORKS, LLC", A DELAWARE LIMITED LIABILITY COMPANY, WITH AND INTO "REHABCARE GROUP EAST, INC." UNDER THE NAME OF "REHABCARE GROUP EAST, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE FIFTEENTH DAY OF DECEMBER, A.D. 2008, AT 2:21 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE FIRST DAY OF JANUARY, A.D. 2009.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 7035676

DATE: 12-18-08

TRADEMARK  
REEL: 004136 FRAME: 0113

**STATE OF DELAWARE  
CERTIFICATE OF MERGER OF  
DOMESTIC LIMITED LIABILITY COMPANY  
INTO A  
DOMESTIC CORPORATION**

Pursuant to Title 8, Section 264(c) of the Delaware General Corporation Law and Title 6, Section 18-209 of the Delaware Limited Liability Company Act, the undersigned corporation executed the following Certificate of Merger:

**FIRST:** The name of the surviving corporation is RehabCare Group East, Inc.  
\_\_\_\_\_, a Delaware Corporation, and the name of the limited liability company being merged into this surviving corporation is Rehabworks, LLC  
\_\_\_\_\_.

**SECOND:** The Agreement of Merger has been approved, adopted, certified, executed and acknowledged by the surviving corporation and the merging limited liability company.

**THIRD:** The name of the surviving corporation is RehabCare Group East, Inc.  
\_\_\_\_\_.

**FOURTH:** The merger is to become effective on 01/01/2009  
\_\_\_\_\_.

**FIFTH:** The Agreement of Merger is on file at 7733 Forsyth Blvd. St. Louis, MO 63105  
\_\_\_\_\_, the place of business of the surviving corporation.

**SIXTH:** A copy of the Agreement of Merger will be furnished by the corporation on request, without cost, to any stockholder of any constituent corporation or member of any constituent limited liability company.

**SEVENTH:** The Certificate of Incorporation of the surviving corporation shall be its Certificate of Incorporation

**IN WITNESS WHEREOF**, said Corporation has caused this certificate to be signed by an authorized officer, the 10<sup>th</sup> day of December, A.D., 2008.

By:   
\_\_\_\_\_  
Authorized Officer

Name: Patricia S. Williams  
\_\_\_\_\_  
Print or Type  
Title: Senior Vice President and General Counsel  
\_\_\_\_\_