

**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          |
| Home Aide Diagnostics, Inc.  |  | 03/24/2011     | CORPORATION: FLORIDA |
| RECEIVING PARTY DATA   |  |                |                      |
| Name:  | Masters Health Care, LLC   |                |                      |
| Street Address:  | 8695 Seward Road   |                |                      |
| City:  | Fairfield  |                |                      |
| State/Country:   | OHIO   |                |                      |
| Postal Code:   | 45011  |                |                      |
| Entity Type:   | LIMITED LIABILITY COMPANY: OHIO  |                |                      |
| PROPERTY NUMBERS Total: 1  |  |                |                      |
| Property Type  | Number   | Word Mark      |                      |
| Registration Number:   | 3682579  | EASY TOUCH     |                      |
| CORRESPONDENCE DATA  |  |                |                      |
| Fax Number:  | (513)241-6234  |                |                      |
|  | <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i> |                |                      |
| Phone:   | 5132412324   |                |                      |
| Email:   | bschatz@whepatent.com  |                |                      |
| Correspondent Name:  | Brett A. Schatz, Wood, Herron & Evans  |                |                      |
| Address Line 1:  | 441 Vine Street  |                |                      |
| Address Line 2:  | 2700 Carew Tower   |                |                      |
| Address Line 4:  | Cincinnati, OHIO 45202   |                |                      |
| ATTORNEY DOCKET NUMBER:  | MPHA-02-134  |                |                      |
| NAME OF SUBMITTER:   | Brett A. Schatz  |                |                      |
| Signature:   | /Brett A. Schatz/  |                |                      |
| Date:  | 04/20/2011   |                |                      |
| Total Attachments: 2<br>source=Settlement Agreement-Assignment#page5.tif<br>source=Settlement Agreement-Assignment#page6.tif |  |                |                      |

OP \$40.00 3682579

EXHIBIT A

TRADEMARK ASSIGNMENT

WHEREAS, Home Aide Diagnostics, Inc. ("Assignor"), a corporation organized under the laws of Florida, located and doing business at 1072 S. Powerline Road, Deerfield Beach, Florida 33442, is the owner of the following trademark currently in use in commerce and registered in the United States Patent and Trademark Office:

**EASY TOUCH (Reg. No. 3,682,579) for "lancets"**

WHEREAS, Masters Health Care, LLC ("Assignee"), a limited liability company organized under the laws of Ohio, located and doing business at 8695 Seward Rd., Fairfield, Ohio 45011, is desirous of acquiring said trademark and federal trademark registration.

NOW, THEREFORE, for good and valuable consideration, the sufficiency and receipt of which is hereby acknowledged, Assignor does hereby assign and transfer to Assignee the entire right, title, and interest in and to the EASY TOUCH mark and the registration for the EASY TOUCH mark, together with the goodwill of the business symbolized by the EASY TOUCH mark and the registration thereof, and all other rights which Assignor has enjoyed thereunder in the United States, including any and all rights of recovery based on past infringement of the EASY TOUCH mark and registration, the same to be held and enjoyed by Assignee, its successors and assigns.

HOME AIDE DIAGNOSTICS, INC. ("Assignor")

By: [Signature]

Name: Amgad Girgis

Title: President

Dated: 3/24/2011

STATE OF FLORIDA )

) ss:  
COUNTY OF Howard )

Subscribed and sworn to before me this 24<sup>th</sup> day of March, 2011.

Name: [Signature]



GWENDOLYN P. WILLIAMS  
MY COMMISSION # DD 962921  
EXPIRES: February 26, 2014  
Bonded Third Budget Notary Services

**MASTERS HEALTH CARE, LLC ("Assignee")**

By: *[Signature]*

Name: John Edmiston

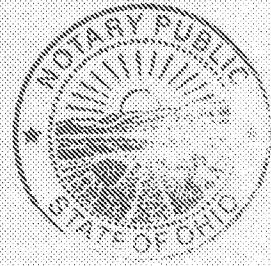
Title: Vice President

Dated: 3/22/2011

STATE OF OHIO                    )  
  ) ss:  
COUNTY OF Hamilton        )

Subscribed and sworn to before me this 22<sup>nd</sup> day of March, 2011.

Name: *[Signature]*



**KEVIN J. MOORE**  
Notary Public, State of Ohio  
My Commission Expires  
May 10, 2011