

FORM PTO-1594
 COMMERCE
 (Rev. 07/05)
 OMB No. 0651-0027 (exp. 06/30/2008)

RECORDATION FORM COVER SHEET

United States Patent and Trademark Office

TRADEMARKS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies):
 Silicon Valley Bank
 3003 Tasman Drive
 Santa Clara, CA 95054

Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State: CA
 Other

Additional name(s) of conveying parties attached? Yes No

2. Name and address of receiving party(ies):
 Additional name(s) of conveying parties attached? Yes No

Name: **Jazz Pharmaceuticals, Inc.**

Internal Address:

Street Address: **3180 Porter Drive**

City: **Palo Alto**
 State: **CA**
 Country: **USA**
 Zip: **94304**

3. Nature of conveyance/ Execution Date(s):

Execution Date(s): **December 27, 2011**

Assignment Merger
 Security Agreement Change of Name
 Other : **Release**

Association Citizenship
 General Partnership Citizenship
 Limited Partnership Citizenship
 Corporation Citizenship : **United States, Delaware**
 Other Citizenship

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
 (Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark:

A. Trademark Application No.(s)	B. Trademark Registration No.(s)
	3342963 3439014 3421517 3439091 3375220 3384315 3375223
	3375226 3375227 3772301 3772303 3772304 3268952 3005804
	3342984 3439015 3439016 3452038 3384314 3375221 3478852
	3377357 3452003 3425390 3375148 3434310 3400930 3375224
	3377358 3377363 3439090 3447780 3429879 3334353 3439278
	3425389 3377384 3425438 3411421 3452137 3334354 3375225
	3374136 3299804

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown): Additional sheets attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **UCC Direct Services**

Internal Address: **Attn: 14080632**

Street Address: **187 Wolf Road, Suite 101**

City: **Albany** State: **NY** ZIP: **12205**

Phone Number: **1-800-342-3676 X 4065**

Fax Number: **1-800-962-7049**

Email Address: **cls-udsalbany@wolterskluwer.com**

6. Total number of applications and registrations involved: 45


7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$ 1140-

Authorized to be charged by credit card
 Authorized to be charged to deposit account
 Enclosed

8. Payment information:

a. Credit Card Last 4 Numbers **1640**
 Expiration Date **10/13**

b. Deposit Account Number
 Authorized User Name

9. Signature.  **12/30/11** Date

Signature
Joseph D Borgman
 Name of Person Signing

Total number of pages including cover sheet, attachments, and document:

OP \$1115.00 334296

**RELEASE OF SECURITY AGREEMENT COVERING
INTERESTS IN TRADEMARKS**

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of **Jazz Pharmaceuticals, Inc.** ("Assignor") in the trademarked works set forth in that certain **Intellectual Property Security Agreement** dated, 06/30/2010, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on 06/30/2010, Reel 4234, Frame 0839.

Dated: **December 27, 2011**

SILICON VALLEY BANK

By: *Romil Randhawa*
Name: **Romil Randhawa**
Title: **Operations Manager**