

TIS/MADRID ASSIGNMENT

Electronic Version v1.0  
Stylesheet Version v1.0

SUBMISSION TYPE:	NEW ASSIGNMENT	<b>APPLICATION NUMBER</b> <b>79056314</b>										
NATURE OF CONVEYANCE:	CHANGE OF NAME											
CONVEYING PARTY DATA												
<table border="1"><thead><tr><th>Name</th><th>Execution Date</th></tr></thead><tbody><tr><td>BIOALLIANCE PHARMA</td><td>03/02/2012</td></tr></tbody></table>			Name	Execution Date	BIOALLIANCE PHARMA	03/02/2012						
Name	Execution Date											
BIOALLIANCE PHARMA	03/02/2012											
RECEIVING PARTY DATA												
<table border="1"><tr><td>Name:</td><td>BIOALLIANCE PHARMA</td></tr><tr><td>Address:</td><td>49 Boulevard du Général Martial Valin F-75015 PARIS</td></tr><tr><td>Country:</td><td>FR</td></tr><tr><td>Entity Type:</td><td></td></tr><tr><td>Entity Country:</td><td>FR</td></tr></table>			Name:	BIOALLIANCE PHARMA	Address:	49 Boulevard du Général Martial Valin F-75015 PARIS	Country:	FR	Entity Type:		Entity Country:	FR
Name:	BIOALLIANCE PHARMA											
Address:	49 Boulevard du Général Martial Valin F-75015 PARIS											
Country:	FR											
Entity Type:												
Entity Country:	FR											
CORRESPONDENCE DATA												
Correspondent Name:	BIOALLIANCE PHARMA											
Address:	49 Boulevard du Général Martial Valin F-75015 PARIS											
Country:	FR											

**THIS  
PAGE  
INTENTIONALLY  
LEFT  
BLANK**