

**TIS/MADRID ASSIGNMENT**

Electronic Version v1.0  
 Stylesheet Version v1.0

SUBMISSION TYPE:	NEW ASSIGNMENT	<b>APPLICATION NUMBER</b> <b>79056318</b>				
NATURE OF CONVEYANCE:	CHANGE OF NAME					
<b>CONVEYING PARTY DATA</b>						
<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					
<b>RECEIVING PARTY DATA</b>						
Name:	BIOALLIANCE PHARMA					
Address:	49 Boulevard du Général Martial Valin F-75015 PARIS					
Country:	FR					
Entity Type:						
Entity Country:	FR					
<b>CORRESPONDENCE DATA</b>						
Correspondent Name:	BIOALLIANCE PHARMA					
Address:	49 Boulevard du Général Martial Valin F-75015 PARIS					
Country:	FR					

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