

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT																										
NATURE OF CONVEYANCE:	MERGER																										
EFFECTIVE DATE:	12/31/2011																										
CONVEYING PARTY DATA																											
<table border="1"> <thead> <tr> <th>Name</th> <th>Formerly</th> <th>Execution Date</th> <th>Entity Type</th> </tr> </thead> <tbody> <tr> <td>DentalCare Partners, Inc.</td> <td></td> <td>12/28/2011</td> <td>CORPORATION: DELAWARE</td> </tr> </tbody> </table>				Name	Formerly	Execution Date	Entity Type	DentalCare Partners, Inc.		12/28/2011	CORPORATION: DELAWARE																
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CORRESPONDENCE DATA																											
Fax Number:	2162410816																										
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>																											
Phone:	216-622-8200																										
Email:	ipdocket@calfee.com																										
Correspondent Name:	Timothy J. Connors																										
Address Line 1:	c/o Calfee, Halter & Griswold LLP																										
Address Line 2:	1405 East Sixth St., The Calfee Building																										
Address Line 4:	Cleveland, OHIO 44114-1607																										
ATTORNEY DOCKET NUMBER:	27449/04167																										

CH \$90.00 2206613

NAME OF SUBMITTER:	Timothy J. Connors
Signature:	/timothy j. connors/
Date:	04/17/2012
Total Attachments: 9 source=01466675#page1.tif source=01466675#page2.tif source=01466675#page3.tif source=01466675#page4.tif source=01466675#page5.tif source=01466675#page6.tif source=01466675#page7.tif source=01466675#page8.tif source=01466675#page9.tif	

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

Office of the Secretary of State

January 02, 2012

Corporation Service Company
211 E. 7th Street, Suite 620
Austin, TX 78701 USA

RE:
DENTAL ONE, INC. (File Number: 157610400)

It has been our pleasure to approve and place on record the filing instrument effecting a merger. The appropriate evidence of filing is attached for your files. Payment of the filing fee is acknowledged by this letter.

If we can be of further service at any time, please let us know.

Sincerely,

Corporations Section
Business & Public Filings Division

Enclosure

Phone: (512) 463-5555
Prepared by: Lisa Jones

Come visit us on the internet at <http://www.sos.state.tx.us/>
Fax: (512) 463-5709
TID: 10339

Dial: 7-1-1 for Relay Services
Document: 402738120001

TRADEMARK
REEL: 004758 FRAME: 0345



Office of the Secretary of State

CERTIFICATE OF MERGER

The undersigned, as Secretary of State of Texas, hereby certifies that a filing instrument merging

DentalCare Partners, Inc.
Foreign For-Profit Corporation
Delaware, USA
[Entity not of Record, Filing Number Not Available]

Into

DENTAL ONE, INC.
Domestic For-Profit Corporation
[File Number: 157610400]

has been received in this office and has been found to conform to law.

Accordingly, the undersigned, as Secretary of State, and by the virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing the acceptance and filing of the merger on the date shown below.

Dated: 12/30/2011

Effective: 12/31/2011



A handwritten signature in black ink, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State

Form 622
(Revised 12/08)
Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512 463-5709
Filing Fee: see instructions



This space reserved for office use.

**Certificate of Merger
Combination Merger
Business Organizations Code**

FILED
In the Office of the
Secretary of State of Texas
DEC 30 2011
Corporations Section

Parties to the Merger

Pursuant to chapter 10 of the Texas Business Organizations Code, and the title applicable to each domestic filing entity identified below, the undersigned parties submit this certificate of merger.

The name, organizational form, state of incorporation or organization, and file number, if any, issued by the secretary of state for each organization that is a party to the merger are as follows:

Party 1

Dental One, Inc.

Name of Organization

The organization is a for-profit corporation It is organized under the laws of
Specify organizational form (e.g., for-profit corporation)

Texas USA The file number, if any, is 157610400
State Country Texas Secretary of State file number

Its principal place of business is 17300 Dallas Parkway Dallas TX
Address City State

The organization will survive the merger. The organization will not survive the merger.

The plan of merger amends the name of the organization. The new name is set forth below.

Name as Amended

Party 2

DentalCare Partners, Inc.

Name of Organization

The organization is a for-profit corporation It is organized under the laws of
Specify organizational form (e.g., for-profit corporation)

Delaware USA The file number, if any, is _____
State Country Texas Secretary of State file number

Its principal place of business is 5875 Landerbrook Dr., Suite 250 Mayfield Heights OH
Address City State

The organization will survive the merger. The organization will not survive the merger.

The plan of merger amends the name of the organization. The new name is set forth below.

Name as Amended

Party 3

Name of Organization

The organization is a _____ It is organized under the laws of
Specify organizational form (e.g., for-profit corporation)

The file number, if any, is _____
State Country Texas Secretary of State file number
Its principal place of business is _____
Address City State

- The organization will survive the merger. The organization will not survive the merger.
 The plan of merger amends the name of the organization. The new name is set forth below.

Name as Amended

Plan of Merger

- The plan of merger is attached.

If the plan of merger is not attached, the following statements must be completed.

Alternative Statements

In lieu of providing the plan of merger, each domestic filing entity certifies that:

1. A signed plan of merger is on file at the principal place of business of each surviving, acquiring, or new domestic entity or non-code organization that is named in this form as a party to the merger or an organization created by the merger.
2. On written request, a copy of the plan of merger will be furnished without cost by each surviving, acquiring, or new domestic entity or non-code organization to any owner or member of any domestic entity that is a party to or created by the plan of merger and, if the certificate of merger identifies multiple surviving domestic entities or non-code organizations, to any creditor or obligee of the parties to the merger at the time of the merger if a liability or obligation is then outstanding.

Complete Item 3B if the merger effected changes to the certificate of formation of a surviving filing entity.

3A. No amendments to the certificate of formation of any surviving filing entity that is a party to the merger are effected by the merger.

3B. The plan of merger effected changes or amendments to the certificate of formation of:

Name of filing entity effecting amendments

The changes or amendments to the filing entity's certificate of formation, other than the name change noted previously, are stated below.

Amendment Text Area

4. Organizations Created by Merger

The name, jurisdiction of organization, principal place of business address, and entity description of each entity or other organization to be created pursuant to the plan of merger are set forth below. The certificate of formation of each new domestic filing entity to be created is being filed with this certificate of merger.

<i>Name of New Organization 1</i>	<i>Jurisdiction</i>	<i>Entity Type (See Instructions)</i>
<i>Principal Place of Business Address</i>	<i>City</i>	<i>State Zip Code</i>
<i>Name of New Organization 2</i>	<i>Jurisdiction</i>	<i>Entity Type (See Instructions)</i>
<i>Principal Place of Business Address</i>	<i>City</i>	<i>State Zip Code</i>
<i>Name of New Organization 3</i>	<i>Jurisdiction</i>	<i>Entity Type (See Instructions)</i>
<i>Principal Place of Business Address</i>	<i>City</i>	<i>State Zip</i>

Approval of the Plan of Merger

The plan of merger has been approved as required by the laws of the jurisdiction of formation of each organization that is a party to the merger and by the governing documents of those organizations.

The approval of the owners or members of _____
Name of domestic entity
 was not required by the provisions of the BOC.

Effectiveness of Filing (Select either A, B, or C.)

A. This document becomes effective when the document is accepted and filed by the secretary of state.

B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: 12/31/2011

C. This document takes effect on the occurrence of the future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

Tax Certificate

Attached hereto is a certificate from the comptroller of public accounts that all taxes under title 2, Tax Code, have been paid by the non-surviving filing entity.

In lieu of providing the tax certificate, one or more of the surviving, acquiring or newly created organizations will be liable for the payment of the required franchise taxes.

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument. The undersigned certifies that the statements contained herein are true and correct, and that the person signing is authorized under the provisions of the Business Organizations Code, or other law applicable to and governing the merging entity, to execute the filing instrument.

Date: 12/28/2011

Dental One, Inc.

Merging Entity Name

David J. Krause

Signature of authorized person (see instructions)
David J. Krause, Vice President - Chief Financial Officer, Treasurer and Assistant Secretary

Printed or typed name of authorized person

DentalCare Partners, Inc.

Merging Entity Name

David J. Krause

Signature of authorized person (see instructions)
David J. Krause, Vice President - Chief Financial Officer, Treasurer and Assistant Secretary

Printed or typed name of authorized person

Merging Entity Name

Signature of authorized person (see instructions)

Printed or typed name of authorized person

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, 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:

"DENTALCARE PARTNERS, INC.", A DELAWARE CORPORATION, WITH AND INTO "DENTAL ONE, INC." UNDER THE NAME OF "DENTAL ONE, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF TEXAS, AS RECEIVED AND FILED IN THIS OFFICE THE TWENTY-EIGHTH DAY OF DECEMBER, A.D. 2011, AT 5:08 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2011.

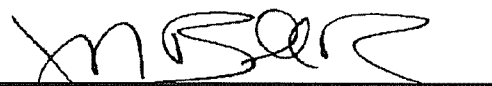
A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

5087527 8100M

111346720



You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9260734

DATE: 12-28-11

TRADEMARK
REEL: 004758 FRAME: 0351

IN WITNESS WHEREOF, said surviving corporation has caused this certificate to be signed by an authorized officer, the 28 day of December, A.D., 2011.

By: David J. Krause
Authorized Officer

Name: David J. Krause
Print or Type

Vice President - Chief Financial Officer, Treasurer and
Title: Assistant Secretary