

APR. 17. 2012 3:17PM

04/09/2012

NO. 637 P. 7



103643150

Form PTO-1594 (Rev. 03-11)

OMB Collection 0651-0027 (exp. 03/31/12)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

RECORDATION FORM COVER SHEET 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):

Wells Fargo Bank Arizona, National Association
64 E. Broadway Road
MAC 53902-012
Tempe, AZ 85282

- ☐ Individual(s) ☒ Association
☐ General Partnership ☐ Limited Partnership
☐ Corporation- State: _____
☐ Other _____

Citizenship (see guidelines) _____

Additional names of conveying parties attached? ☐ Yes ☐ No

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

Execution Date(s) 2-10-12

- ☐ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☒ Other RELEASE

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? ☐ Yes ☐ NoName: Medicus Pharmaceutical Corporation

Internal

Address: _____

Street Address: 4343 E. CAMELBACK ROADCity: PHOENIXState: AZCountry: USAZip: 80518

- ☐ Association Citizenship _____
☐ General Partnership Citizenship _____
☐ Limited Partnership Citizenship _____
☒ Corporation Citizenship AZ
☐ 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)

SEE ATTACHED SCHEDULE

B. Trademark Registration No.(s)

SEE ATTACHED SCHEDULE

Additional sheet(s) attached? ☒ Yes ☐ No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

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

Name: WELLS FARGO BANK, N.A.

Internal Address: _____

Street Address: 1740 BROADWAYCity: DENVERState: COLORADOZip: 80274Phone Number: 303-863-5943

Fax Number: _____

Email Address: stephanie.lang@wellsfargo.com

6. Total number of applications and registrations involved:

20

7. Total fee (37 CFR 2.6(b)(6) & 3.41)

\$515.00

- ☐ Authorized to be charged to deposit account
☒ Enclosed

8. Payment Information:

Deposit Account Number _____

Authorized User Name _____

9. Signature:

Stephanie Lang
Signature
Name of Person Signing

Date

2/10/12

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

02/14/2012 00000002 0 8522

\$475.00

02/13/2012

CK

02/14/2012 00000001 0 8521

\$40.00

02/13/2012

CK

February 13, 2012

From: Wells Fargo Bank, National Association

Trademark Reg #'s to be released for Medicus Pharmaceutical Corp

1171932
2096055
2203912
2426040
2427453
2329449
2557654
2448684
2497690
2452777
2478612
2713864
2511710
2505510
2646837
2622114
2615912
2618846

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**WELLS
FARGO**

Wholesale Loan Services
MAC C7300-033
1740 Broadway Street, 3rd Floor
Denver, CO 80274

February 10, 2012

US Department of Commerce

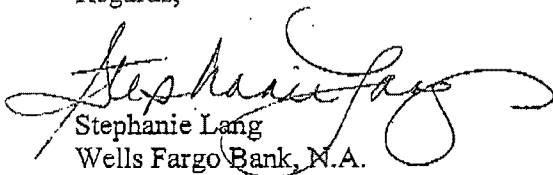
Commission, Patent & Trademark Division

To Whom It May Concern:

Enclosed is information to release Wells Fargo's interest in the Trademarks listed on the enclosed form for Medicus Pharmaceutical Corporation.

Please contact me if you need additional information.

Regards,


Stephanie Lang
Wells Fargo Bank, N.A.
303-863-5943

Read
this

Letter
R. Neal

4/18/12