

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM305741

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the "Entity Type" of the Receiving Party needs to be changed from "Corporation":Oregon to "Limited Liability Company":Oregon previously recorded on Reel 005217 Frame 0226. Assignor(s) hereby confirms the ASSIGNS THE ENTIRE INTEREST AND GOODWILL.

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Health Care Training Systems, Inc.		05/01/2012	CORPORATION: OREGON

RECEIVING PARTY DATA

Name:	Institute for Professional Care Education, LLC
Street Address:	8740 SE Sunnybrook Blvd.
City:	Clackamas
State/Country:	OREGON
Postal Code:	97015
Entity Type:	LIMITED LIABILITY COMPANY: OREGON

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark
Registration Number:	3386031	MEDIFECTA HEALTHCARE TRAINING
Registration Number:	3480045	NATIONAL CAREGIVER TRAINING PROGRAM

CORRESPONDENCE DATA

Fax Number: 8474919801
Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.
Phone: 847-491-9800
Email: chris@trademarksearch.com
Correspondent Name: CHRISTOPHER J. BISCHOFF
Address Line 1: 1650 PAYNE ST
Address Line 4: EVANSTON, ILLINOIS 60201

NAME OF SUBMITTER:	Christopher J. Bischoff
SIGNATURE:	/Christopher J. Bischoff/
DATE SIGNED:	05/28/2014

Total Attachments: 4

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TRADEMARK

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TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNS THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Health Care Training Systems, Inc.		05/01/2012	CORPORATION: OREGON
RECEIVING PARTY DATA			
Name:	Institute for Professional Care Education, LLC		
Street Address:	8740 SE Sunnybrook Blvd.		
Internal Address:	Suite 300		
City:	Clackamas		
State/Country:	OREGON		
Postal Code:	97015		
Entity Type:	CORPORATION: OREGON		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	3386031	MEDIFECTA HEALTHCARE TRAINING	
Registration Number:	3480045	NATIONAL CAREGIVER TRAINING PROGRAM	
CORRESPONDENCE DATA			
Fax Number:	8474919801		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>			
Phone:	847-491-9800		
Email:	chris@trademarksearch.com		
Correspondent Name:	Christopher J. Bischoff		
Address Line 1:	1650 PAYNE ST		
Address Line 4:	EVANSTON, ILLINOIS 60201		
NAME OF SUBMITTER:	Christopher J. Bischoff		
Signature:	/Christopher J. Bischoff/		
Date:	02/14/2014		
Total Attachments: 3 source=Trademark Assignment Agreement - Executed#page1.tif source=Trademark Assignment Agreement - Executed#page2.tif source=Trademark Assignment Agreement - Executed#page3.tif			

OP \$65.00 3386031

Schedule 3.6(b)

Trademark Assignment Agreement

THIS TRADEMARK ASSIGNMENT AGREEMENT (the "Assignment") is effective this 1st day of ~~April~~ May 2012. It is by and between Health Care Training Systems, Inc., an Oregon C Corporation, Marion Karpinski, Michael Karpinski ("we, us"), and Institute for Professional Care Education, LLC, an Oregon limited liability company ("you").

Recitals

We own all rights, title, and interest in and to the marks as set forth in Exhibit 1 (collectively, the "Marks") and have certain rights to and valuable goodwill connected with and symbolized by the Marks.

You wish to acquire the entire rights, title, and interest in the Marks.

THEREFORE, for good and valuable consideration, the receipt and adequacy of which are acknowledged, the parties agree as follows:

I ASSIGNMENT

- 1.1 We hereby irrevocably assign, transfer, and otherwise convey to you all rights, title, and interest in and to the Marks in the United States and all jurisdictions symbolized by the Marks to the fullest extent that we could have held and enjoyed had this sale, assignment, transfer, and conveyance not been made. This includes, without limitation, all registration rights with respect to the Marks within or outside the United States based in whole or in part upon the Marks, the right to renew any registrations, all rights to prepare derivative marks, any priority right that may arise from the Marks, all goodwill, and all other rights.
- 1.2 We authorize the Commissioner of Trademarks of the United States and other empowered officials of the United States Patent and Trademark Office and officials in any applicable jurisdictions outside the United States to record the transfer of the registrations and applications for registration set forth in Exhibit 1 to you as assignee of our entire right, title and interest therein. We agree to further execute any documents reasonably necessary at any time now or in the future to effect or perfect this assignment or to confirm your ownership of the Marks.

SIGNATURES

IN WITNESS, the parties have executed this Agreement on the day and year first above written.

("We/Us"): Health Care Training Systems, Inc.

("You"): Institute for Professional Care Education, LLC

By: Marion Karpinski

By: [Signature]

Title: President

Title: Manager

Marion Karpinski
Marion Karpinski

Michael Karpinski
Michael Karpinski

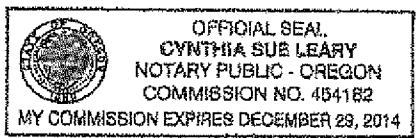
STATE OF OREGON)
County of Jackson) ss.

On this 1st day of ^{May}~~April~~, 2012, before me the undersigned officer, personally appeared Marion Karpinski and Michael Karpinski, known personally to me (or proved to me on the basis of satisfactory evidence) to be Marion Karpinski and Michael Karpinski, individuals, and Marion Karpinski as the President of the above-named Health Care Training Systems, Inc., and that he or she, as such officer, being authorized to do so, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself or herself as such officer.

Such officer and such individuals, being first duly sworn, stated upon oath that said application, and all exhibits submitted herewith, are true and correct.

IN WITNESS WHEREOF I have hereunto set my hand and official seal.

[Signature]
Notary Public



My Commission Expires:

Exhibit 1 to Trademark Assignment Agreement

Marks

Mark	Registration Number	Registration Date
Medifecta Healthcare Training	3,386,031	February 19, 2008
National Caregiver Training Program	3,480,045	August 5, 2008