

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM361342

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	RELEASE OF SECURITY INTEREST		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Comercia Bank		11/04/2015	Banking Association:
RECEIVING PARTY DATA			
Name:	Key Health Group, Inc.		
Street Address:	5601 Lindero Canyon Rd, Suite 220		
City:	Westlake Village		
State/Country:	CALIFORNIA		
Postal Code:	91362		
Entity Type:	CORPORATION: DELAWARE		
PROPERTY NUMBERS Total: 6			
Property Type	Number	Word Mark	
Registration Number:	4181737	ACCIDENTMEDS	
Registration Number:	4405894	KEY HEALTH	
Registration Number:	4387031	KEY HEALTH	
Registration Number:	3192669	KEY HEALTH	
Registration Number:	3304249	KEY HEALTH	
Serial Number:	86446050	MEDLEGAL SOLUTIONS, INC.	
CORRESPONDENCE DATA			
Fax Number:	3128278185		
<i>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.</i>			
Email:	valerie.swanson@klgates.com		
Correspondent Name:	K&L Gates LLP		
Address Line 1:	P.O. Box 1135		
Address Line 4:	Chicago, ILLINOIS 60690-1135		
ATTORNEY DOCKET NUMBER:	1958619.00011		
NAME OF SUBMITTER:	Don Bingham		
SIGNATURE:	/Don Bingham/		
DATE SIGNED:	11/05/2015		
Total Attachments: 3			

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**RELEASE AND TERMINATION OF GRANT OF
SECURITY INTEREST IN UNITED STATES TRADEMARKS**

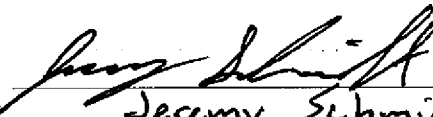
WHEREAS, COMERICA BANK ("Comerica"), is the owner of outstanding security interests filed against the U.S. Trademark registrations and pending applications referred to in *Exhibit A* attached hereto (the "Marks") owned by KEY HEALTH GROUP, INC., a Delaware corporation ("Key Health"), which security interests in the Marks were recorded in the U.S. Patent and Trademark Office Assignment Branch;

WHEREAS, the parties wish to remove and terminate the aforesaid security interests and liens against the Marks in the name of Comerica so that Key Health will have unencumbered title to the Marks;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Comerica does hereby release, remit and discharge its security interests and liens outstanding against the Marks listed on *Exhibit A* and quit claim forever unto Key Health all its right, title and interest in and to the Marks aforesaid together with any goodwill of the business symbolized thereby.

IN WITNESS WHEREOF, the undersigned has caused this release to be executed this 4th day of November, 2015.

COMERICA BANK

By: 
Name: Jeremy Schmidt
Title: VP

State of _____)
) SS.
County of _____)

See attached

On this _____ day of November 2015, before me, a Notary Public in and for the State of _____, in the County aforesaid, personally appeared _____, to me known to be _____ of Comerica, that executed the foregoing instrument, and upon oath did depose that he/she is _____ of Comerica as indicated after said signature, and that Comerica executed the said instrument freely and voluntarily for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year first above written.

Notary Public in and for said State and County
My commission expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

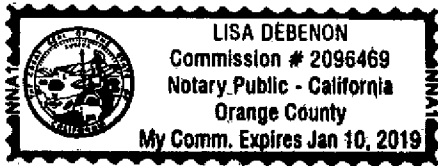
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Orange)
On November 4, 2015 before me, Lisa DeBenon
Date Here Insert Name and Title of the Officer
personally appeared Jeremy Schmidt
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document


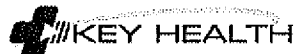

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

EXHIBIT A
TRADEMARK LIEN RELEASES
SCHEDULE I
TO
TRADEMARK SECURITY AGREEMENT

Trademark	Reel/Frame Recording Date	Registration Number/Date	Country
	Reel 005006; Frame 0182 04/12/2013	4,181,737 07/31/2012	United States
KEY HEALTH	Reel 005006; Frame 0182 04/12/2013	4,405,894 09/24/2013	United States
	Reel 005006; Frame 0182 04/12/2013	4,387,031 08/20/2013	United States
Key Health	Reel 003238; Frame 0373 02/01/2006	3,192,669 01/02/2007	United States
	Reel 003238; Frame 0373 02/01/2006	3,304,249 10/02/2007	United States

Trademark Applications:

Trademark Applications	Reel/Frame Recording Date	Serial Number Filing Date	Country
MedLegal Solutions, Inc.	Reel 005482; Frame 0063 03/19/2015	86/446,050 11/05/2014	United States