FORM PTO-1594 (Rev. 6-93)	-30-20	02	SHEET	U.S. DEPARTMI Patent	ENT OF COMMERC
OMB No. 0651-0011 (exp. 4/94)			Y		
Tab settings ○ ○ ○ ▼		I IIIII animi mer men		▼	
4	102173	201	use attached origina		
Name of conveying party(ies):	, , ,	2. Name	and address of re	eceiving party(ies)
Spa Health Consultants 10.15	12	Name	: Avance, In	c.	
0 7 0 5 0		Interna	al Address:		Σ.
☐ Individual(s). ☐ Association		Address: 21-2			
General Partnership Limited Partnership			\ <u>\</u>		
☐ Other	}	City:	Fair Lawn	State: _NJ	ZIP: 0/410
Additional name(s) of conveying party(ies) attached? Yes	No	☐ Indi	vidual(s) citizensl	nip	
3. Nature of conveyance:		☐ Ass	ociation neral Partnership_		
·	İ	C) Lim	ited Partnership_		
☐ Assignment ☐ Merger ☐ Security Agreement ☐ Change (of Name		poration-State er		
Other		If assignee is	not domiciled in the Unit	ed States, a domestic re	
Execution Date: October 23, 2000	{	is attached: (Designations	must be a separate doc	☐ Yes ☑ No ument from assignment)	
		Additional nar	ne(s) & address(es) atta	ched? Q Yes 12 No	
4. Application number(s) or patent number(s):					
A. Trademark Application No.(s)		B. Tra	demark Registrat	ion No.(s)	
		2,	005,468		
Additional	I numbers attac	hed? 🖸 Yes	ØY No		
5. Name and address of party to whom corresponden	nce	6. Total n	umber of applicat	ions and	
concerning document should be mailed:	ļ	registra	ations involved:	·····	
Name: Lawrence D. Mandel					
Internal Address: Klauber & Jackson		7. Total fe	ee (37 CFR 3.41).	<u>\$40.00</u>	
illema Address. Namer & Jackson		⊠ End	closed		
					
	 	W Aut	horized to be cha	•	recessary
Street Address: 411 Hackensack Avenue					-
		8. Deposi	t account number	: if necessar	У
City: Hackensack State: NJ ZIP: 0	7601	11-11	.53		
City: <u>Hackensack</u> State: <u>N.J</u> ZIP: 0	7.601	(Attach o	luplicate copy of this p	page if paying by depo	osit account)
07/29/2002 AAHNED1 00000035 2005468	DO NOT USE 1	HIS SPACE			
01 FC:481 40-00 DP					
9. Statement and signature. To the best of my knowledge and belief, the foregon	oing informati	ion is true a	nd correct and an	y attached copy i	s a true copy of
the original document.	and the second second second second second	and the same and the same and the same		- •••	· • • • • • • • • • • • • • • • • • • •
Lawrence D. Mandel				_7/3/	
Name of Person Signing		gnature	chments, and docume	ont: 3	Date

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231



New Jersey Department of State Division of Commercial Recording

FILED	12/9:
OCT 23 2000	
State Treasurer	

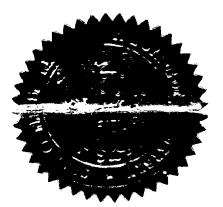
		Certific	s of Amendment t ate of Incorporati Domesic Profit Corpora	on	OCT 2 3 200	
"F	ederal Employer Identification N	o." .			State Treasure	
	Pursuant to the provisions of Solersey Statutes, the undersigned of Incorporation:	ction 14A:9-2 (4) i corporation execu	md Section 14A:9-4 (tes the following Cert	5), Corporations ificate of Amand	Roland Machol	d
1.	The name of the corporation is:	SPA HEALTH (CONSULTANTS; INC			
2.	The following amendment to the adopted by the shareholders of the	e Centificara of Inc the corporation on t	orporation was approv	ed by the direct	ors and thereafter du	ly .
	Resolved, that Article First	of the C	ertificate of Incorpora	tion be amended	l to read as follows:	
	The name of the Co	rporation is:	Avance, Inc.		· · · · · · · · · · · · · · · · · · ·	. •
3.	The number of shares outstandig The total number of shares entit			adment was1	0	
	If the shares of any class or series of outstanding shares entitled to vote th	shares are entitled to a secon of each such of	vote thereon as a class, so us or series. (Ocrit if not	t forth below the d applicable).	esignation and number	if
4.	The number of shares voting for are entitled to vote as a class, so the amendment, respectively).	rand against such a t forth the number	mendment is as follow of shares of each such	vs: (If the share class and series	es of any class or seri voting for and again	ies st
	Number of Shares Voting for A	nendment .	Number of Sh	ares Voting Aga	net Amendment	
	10			0		
5.	If the amendment provides for a of the manner in which the same				res, set forth a statem	ent
6.	Other provisions: (Omit if not a		•			
	Principal office: Registered agent:	21-21 Broadwa	y, Fairlawn, NJ	07410	•	
	Kegistered again:	21-21 Broadwa	y, Fairlawn, NJ	07410		
		i	SPA HEALT	H CONSULTANT		
•		1 .	f'I	Orporate N	ims)	
		:	Ву:	(Signature	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	- 1 m 2 a TE	September . ***	OARHON		-CHARLEN J-C	LEO ·
	Dated this 29 day of	<u> </u>	_EROU	(Type Name and		· · · · · ·
	May be executed by the Chairman of	' the Board, or the Pre	sidem, og a Vice Presiden	t of the Corporatio	D.	
	The purpose of this form is to simpli competent legal advice.	fy the filing requirence				
		1	,		,	A A.

3859366 1630649 0100255489

STATE OF NEW JERSEY DEPARTMENT OF TREASURY FILING CERTIFICATION (CERTIFIED COPY)

AVANCE, INC.

I, the Treasurer of the State of New Jersey, do hereby certify, that the above named business did file and record in this department the below listed document(s) and that the foregoing is a true copy of the CERTIFICATE OF AMENDMENT as the same is taken from and compared with the original(s) filed in this office on the date set forth on each instrument and now remaining on file and of record in my office.



RECORDED: 07/05/2002

 $IN\ TESTIMONY\ WHEREOF, I\ have$

hereunto set my hand and affixed my Official Seal at Trenton, this 18th day of June, 2002

Johnstone

John E McCormac, CPA State Treasurer

> TRADEMARK REEL: 002551 FRAME: 0379