

Form PTO-1594 (Rev. 06/04)  
OMB Collection 0651-0027 (exp. 6/30/2005)

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)/Execution Date(s):**

ViRexx Research Inc.

- Individual(s)
- Association
- General Partnership
- Limited Partnership
- Corporation-State Alberta, CANADA
- Other \_\_\_\_\_

Citizenship (see guidelines) CANADA

Execution Date(s) Dec. 23, 2003

Additional names of conveying parties attached?  Yes  No

**3. Nature of conveyance:**

- Assignment
- Merger
- Security Agreement
- Change of Name
- Other \_\_\_\_\_

**2. Name and address of receiving party(ies)**

Additional names, addresses, or citizenship attached?  Yes  No

Name: ViRexx Medical Corp

Internal

Address: \_\_\_\_\_

Street Address: 1500, 10180 - 101 St.

City: Edmonton

State: Alberta

Country: CANADA Zip: T5J 4K1

- Association Citizenship \_\_\_\_\_
- General Partnership Citizenship \_\_\_\_\_
- Limited Partnership Citizenship \_\_\_\_\_
- Corporation Citizenship CANADA
- 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)

78/122,659

B. Trademark Registration No.(s)

Additional sheet(s) attached?  Yes  No

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

CHEMIGEN

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

Name: Ellen P. Winner

Internal Address: \_\_\_\_\_

Street Address: 5370 Manhattan Cir.

City: Boulder

State: CO Zip: 80303

Phone Number: 303-499-8080

Fax Number: 303-499-8089

Email Address: ewinner@greenwin.com

**6. Total number of applications and registrations involved:**

1

**7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40**

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

**8. Payment Information:**

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_

b. Deposit Account Number 07-1969

Authorized User Name Ellen P. Winner

9. Signature: Ellen P. Winner

Signature

August 11, 2004

Date

Ellen P. Winner

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 5

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

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State: Alberta

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- General Partnership Citizenship \_\_\_\_\_
- Limited Partnership Citizenship \_\_\_\_\_
- Corporation Citizenship CA
- Other \_\_\_\_\_ Citizenship \_\_\_\_\_

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CH 1540.00 07/19/99 7/12/2005

**CORPORATE ACCESS NUMBER: 2010829345**

**Alberta**

**BUSINESS CORPORATIONS ACT**

**CERTIFICATE  
OF  
AMALGAMATION**

**VIREXX MEDICAL CORP.  
IS THE RESULT OF AN AMALGAMATION FILED ON 2003/12/23.**



# Amalgamate Alberta Corporation - Registration Statement

**Service Request Number:** 5630341  
**Alberta Corporation Type:** Named Alberta Corporation  
**Legal Entity Name:** VIREXX MEDICAL CORP.  
**French Equivalent Name:**  
**Nuans Number:** 78585550  
**Nuans Date:** 2003/11/10  
**French Nuans Number:**  
**French Nuans Date:**

## REGISTERED ADDRESS

**Street:** 1500, 10180 - 101 STREET  
**Legal Description:**  
**City:** EDMONTON  
**Province:** ALBERTA  
**Postal Code:** T5J 4K1

## RECORDS ADDRESS

**Street:** 1500, 10180 - 101 STREET  
**Legal Description:**  
**City:** EDMONTON  
**Province:** ALBERTA  
**Postal Code:** T5J 4K1

## ADDRESS FOR SERVICE BY MAIL

**Post Office Box:**  
**City:**  
**Province:**  
**Postal Code:**  
**Internet Mail ID:**

**Share Structure:** SEE SCHEDULE "A" ATTACHED.  
**Share Transfers Restrictions:** THERE ARE NO RESTRICTIONS ON THE TRANSFER OF SHARES IN THE CAPITAL OF THE CORPORATION.  
**Number of Directors:**  
**Min Number Of Directors:** 3  
**Max Number Of Directors:** 15  
**Business Restricted To:** NONE  
**Business Restricted From:** NONE  
**Other Provisions:** SEE SCHEDULE "B" ATTACHED.

**Professional Endorsement****Provided:****Future Dating Required:****Registration Date:** 2003/12/23**Director****Last Name:** NOUJAIM**First Name:** ANTOINE**Middle Name:****Street/Box Number:** 1123 DENTISTRY-PHARMACY BLDG., U OF A**City:** EDMONTON**Province:** ALBERTA**Postal Code:** T6G 2N8**Country:****Resident Canadian:** Y**Named On Stat Dec:****Last Name:** TYRRELL**First Name:** LORNE**Middle Name:****Street/Box Number:** 2J2.01 WMC, UNIVERSITY OF ALBERTA**City:** EDMONTON**Province:** ALBERTA**Postal Code:** T6G 2R7**Country:****Resident Canadian:** Y**Named On Stat Dec:****Last Name:** BROWN**First Name:** THOMAS**Middle Name:****Street/Box Number:** 9220 - 25 AVENUE**City:** EDMONTON**Province:** ALBERTA**Postal Code:** T6N 1E1**Country:****Resident Canadian:** Y**Named On Stat Dec:**

**Last Name:** HIRSCH  
**First Name:** BRUCE  
**Middle Name:**  
**Street/Box Number:** 1500 MANULIFE PLACE, 10180 - 101 STREET  
**City:** EDMONTON  
**Province:** ALBERTA  
**Postal Code:** T5J 4K1  
**Country:**  
**Resident Canadian:** Y  
**Named On Stat Dec:**

**Amalgamating Corporation**

Corporate Access Number	Legal Entity Name
203528096	NORAC INDUSTRIES INC.
209093848	NORAC ACQUISITIONS INC.
2010012371	VIREXX RESEARCH INC.

**Attachment**

Attachment Type	Microfilm Bar Code	Date Recorded
Share Structure	ELECTRONIC	2003/12/23
Other Rules or Provisions	ELECTRONIC	2003/12/23
Amalgamation Agreement	10000899000132926	2003/12/23
Statutory Declaration	10000599000132923	2003/12/23

**Registration Authorized By:** BRUCE D. HIRSCH  
 SOLICITOR