

FORM PTO-1594 (Modified)
(Rev. 6-93)
OMB No. 0651-0011 (exp. 4/94)
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RECORDATION FORM COVER SHEET

Docket No.:

035.IHAS:133US

TRADEMARKS / SERVICE MARKS ONLY

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To the Director of the United States Patent and Trademark Office: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

MVP Health Plan, Inc.
625 State Street
Schenectady, NY 12305

- Individual(s)
- General Partnership
- Corporation-State New York
- Other
- Association
- Limited Partnership

Additional names(s) of conveying party(ies) Yes No

3. Nature of conveyance:

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

Execution Date: August 1, 2006

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

Name: Independent Health Association, Inc.

Internal Address: _____

Street Address: 511 Farber Lakes

City: Buffalo State: NY ZIP: 14221

- Individual(s) citizenship _____
- Association _____
- General Partnership _____
- Limited Partnership _____
- Corporation-State New York
- Other _____

If assignee is not domiciled in the United States, a domestic designation is Yes N
(Designations must be a separate document from Additional name(s) & address(es) Yes N

4. Application number(s) or registration numbers(s):

A. Trademark / Service Mark Application No.(s)

B. Trademark / Service Mark Registration No.(s)

2,911,424

Additional numbers Yes No

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

Name: Ellen S. Simpson, Esq.

Internal Address: Simpson & Simpson, PLLC

Street Address: 5555 Main Street

City: Williamsville State: NY ZIP: 14221

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

1

7. Total fee (37 CFR 3.41):.....\$

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

50-0822

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Ellen S. Simpson

Name of Person Signing

August 11, 2006

Signature

Date

2

Total number of pages including cover sheet, attachments, and

Mail documents to be recorded with required cover sheet information to:
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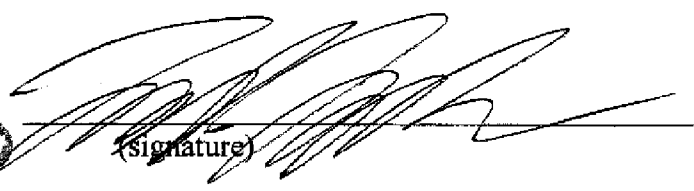
SERVICE MARK ASSIGNMENT

WHEREAS, MVP Health Plan, Inc., a corporation of New York, having a principal place of business at 625 State Street, Schenectady, New York 12305, has adopted, used and is using the service mark ONEPOINT ALLIANCE (hereinafter referred to as SERVICE MARK) in commerce in the United States, and has been granted federal registration of said SERVICE MARK under United States Service mark Registration No. 2,911,424, and,

WHEREAS, Independent Health Association, Inc., a corporation of New York, having a principal place of business at 511 Farber Lakes Drive, Buffalo, New York 14221, is desirous of acquiring said SERVICE MARK and said federal service mark registration, together with the good will of the business associated therewith;

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, said MVP Health Plan, Inc., does hereby assign unto said Independent Health Association, Inc., all right, title and interest in and to said SERVICE MARK, together with the good will of the business symbolized by said SERVICE MARK together with said federal registration of said SERVICE MARK.

Dated: August 1, 2006


(signature)

Frank J. Fanshawe (typed name of signatory)

Vice President of Compliance and Associate General Counsel (official title of signatory)

