

Form PTO-1594 (Rev. 07/05)
 OMB Collection 0651-0027 (exp. 6/30/2008)

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.

<p>1. Name of conveying party(ies): ORTHOsoft Inc.</p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation- State: <u>Quebec, Canada</u> <input type="checkbox"/> Other _____</p> <p>Citizenship (see guidelines) _____</p> <p>Additional names of conveying parties attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Nature of conveyance /Execution Date(s) : Execution Date(s) <u>August 24, 2004 confirmed July 24, 2007</u></p> <p><input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____</p>	<p>2. Name and address of receiving party(ies) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Additional names, addresses, or citizenship attached?</p> <p>Name: <u>ORTHOsoft Holdings Inc.</u> Internal Address: <u>Suite 3300</u> Street Address: <u>75 Quenn Street</u> City: <u>Montreal</u> State: <u>Quebec</u> Country: <u>Canada</u> Zip: <u>H3C 2N6</u></p> <p><input type="checkbox"/> Association Citizenship _____ <input type="checkbox"/> General Partnership Citizenship _____ <input type="checkbox"/> Limited Partnership Citizenship _____ <input checked="" type="checkbox"/> Corporation Citizenship _____ <input type="checkbox"/> Other _____ Citizenship _____</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment)</p>
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<p>4. Application number(s) or registration number(s) and identification or description of the Trademark.</p> <p>A. Trademark Application No.(s) _____</p> <p>B. Trademark Registration No.(s) <u>2,938,810</u></p>	<p>Additional sheet(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

<p>5. Name & address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Laetitia Caporicci</u> Internal Address: <u>Suite 1100</u> Street Address: <u>1981 McGill College Avenue</u> City: <u>Montreal</u> State: <u>Quebec Canada</u> Zip: <u>H3A 3C1</u> Phone Number: <u>514-847-6034</u> Fax Number: <u>514-286-5474</u> Email Address: <u>lcaporicci@ogilvyrenault.com</u></p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ <u>40.00</u></p> <p><input type="checkbox"/> Authorized to be charged by credit card <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed</p> <p>8. Payment Information:</p> <p>a. Credit Card Last 4 Numbers _____ Expiration Date _____</p> <p>b. Deposit Account Number <u>195113</u> Authorized User Name _____</p>
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<p>9. Signature: <u></u> _____ Signature Laetitia Caporicci Name of Person Signing</p>	<p>November 18, 2007 _____ Date</p> <p>Total number of pages including cover sheet, attachments, and document: 8</p>
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Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1460, Alexandria, VA 22313-1460

CH \$40.00 195113 2938810

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**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):
 ORTHOsoft Inc.

Individual(s) Association
 General Partnership Limited Partnership
 Corporation- State: Quebec, Canada
 Other _____

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

2. Name and address of receiving party(ies) Yes
 Additional names, addresses, or citizenship attached? No

Name: ORTHOsoft Inc.
 Internal
 Address: Suite 3300
 Street Address: 75 Quenn Street
 City: Montreal
 State: Quebec
 Country: Canada Zip: H3C 2N6

Association Citizenship _____
 General Partnership Citizenship _____
 Limited Partnership Citizenship _____
 Corporation Citizenship _____
 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)

3. Nature of conveyance /Execution Date(s) :

Execution Date(s) August 24, 2004 confirmed July 27, 2007

Assignment Merger
 Security Agreement Change of Name
 Other _____

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

B. Trademark Registration No.(s)
2,938,810

Additional sheet(s) attached? Yes No

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

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

Name: Laetitia Caporicci
 Internal Address: Suite 1100
 Street Address: 1981 McGill College Avenue
 City: Montreal
 State: Quebec Canada Zip: H3A 3C1
 Phone Number: 514-847-6034
 Fax Number: 514-286-5474
 Email Address: lcaporicci@ogilvyrenault.com

6. Total number of applications and registrations involved: 1

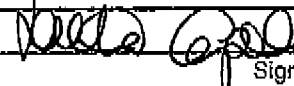
7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00

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 195113
 Authorized User Name _____

9. Signature:  November 8, 2007
 Signature Date
Laetitia Caporicci
 Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 3

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
 Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

CONFIRMATORY TRADEMARKS ASSIGNMENT

WHEREAS, We, ORTHOSOFT INC., a corporation duly incorporated on June 19, 1995, hereinafter referred to as the Assignor, whose registered address is 75 Rue Queen, Bureau 3300, Montreal, Québec, H3C 2N6, have the rights, title and interest in and to the Trademarks listed in Appendix A attached hereto, and;

WHEREAS, ORTHOSOFT HOLDINGS INC., hereinafter referred to as the Assignee, whose registered address is 75 Rue Queen, Bureau 3300, Montreal, Québec, H3C 2N6, is desirous of acquiring the entire right, title and interest in and to said Trademarks;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor assigns, sells and transfers to Assignee all right, title and interest in and to the Trademarks, the goodwill of the business connected with the use and symbolized by the Trademarks, all registrations and applications for registration thereof, all rights of action accrued and to accrue under and by virtue thereof, including the right to sue and recover for past infringement of said Trademarks.

We further agree without any payment by the Assignee other than expenses incurred by the undersigned, to communicate to the Assignee, its representatives or agents, any facts relating to said Trademarks, including evidence for any proceedings, whenever requested; testify in any litigation or other proceedings, whenever requested; and execute and deliver, on request, all lawful papers required to make any of the foregoing provisions effective, and likewise make these provisions binding upon my/our heirs, legal representatives, administrators and assigns.

Le(s) soussigné(s) désire(nt) que la présente cession soit en anglais. The undersigned request(s) that the present assignment be in English.

This Assignment is executed the 27th day of July, 2007 but is confirmatory of an understanding between the parties as of the 24th day of August 2004.

IN WITNESS WHEREOF, the Parties have executed, made and entered into this Assignment under seal as of the date first set forth above.

IN WITNESS WHEREOF, We have hereunto set our hands

and seal this 27th day of July 2007



Louis Malette

(signature of Witness)

Name: Louis P. Amiot
 Title: CHAIRMAN & CEO
 Signature: [Handwritten Signature]

APPENDIX A

Country	Mark	Registration No.
Canada	FluoroSpine	TMA606913
United States	ORTHO SOFT	2,938,810