

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Scar Heal, Inc.	FORMERLY Specialty Systems, Inc.	08/18/2008	CORPORATION: FLORIDA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Scar Heal, Inc.		
<b>Street Address:</b>	352 G 150th Avenue		
<b>City:</b>	Madeira Beach		
<b>State/Country:</b>	FLORIDA		
<b>Postal Code:</b>	33708		
<b>Entity Type:</b>	CORPORATION: FLORIDA		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
Registration Number:	3240944	SCARHEAL	
<b>CORRESPONDENCE DATA</b>			
Fax Number:	(727)398-7227		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	7273977227		
Email:	sales@scarheal.com		
Correspondent Name:	Scar Heal, Inc.		
Address Line 1:	352 G 150th Avenue		
Address Line 4:	Madeira Beach, FLORIDA 33708		
<b>NAME OF SUBMITTER:</b>	Glenn Joyner		
<b>Signature:</b>	/glenn joyner/		
<b>Date:</b>	09/17/2009		
Total Attachments: 0			

OP \$40.00 3240944

**THIS  
PAGE  
INTENTIONALLY  
LEFT  
BLANK**