

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:		NEW ASSIGNMENT	
NATURE OF CONVEYANCE:		ASSIGNS THE ENTIRE INTEREST AND THE GOODWILL	
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
All American Physicians Associates, LLC		07/07/2011	CORPORATION: FLORIDA
RECEIVING PARTY DATA			
Name:	Access Health Care Physicians, LLC		
Street Address:	One Park Plaza		
City:	Nashville		
State/Country:	TENNESSEE		
Postal Code:	37203		
Entity Type:	CORPORATION: TENNESSEE		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3926349	ALL AMERICAN PHYSICIANS ASSOCIATES	
CORRESPONDENCE DATA			
Fax Number:	(561)659-6313		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	5616535000		
Email:	ip@akerman.com, peter.chiabotti@akerman.com		
Correspondent Name:	Peter A. Chiabotti		
Address Line 1:	222 Lakeview Avenue		
Address Line 2:	Suite 400		
Address Line 4:	West Palm Beach, FLORIDA 33401-6147		
ATTORNEY DOCKET NUMBER:	10186-1 (227639)		
NAME OF SUBMITTER:	Peter A. Chiabotti		
Signature:	/Peter A. Chiabotti/		

CH \$40.00 3926349

Date:

08/09/2011

Total Attachments: 3

source=WP798809#page1.tif

source=WP798809#page2.tif

source=WP798809#page3.tif

TRADEMARK ASSIGNMENT

THIS ASSIGNMENT ("Assignment") is made and entered into as of July 1, 2011 (the "Effective Date") by and between All American Physicians Associates, LLC, a Florida corporation, with an address of 15215 Cortez Boulevard, Brooksville, Florida 34613 ("Assignor"), and Access Health Care Physicians, LLC, a Tennessee corporation, with an address of One Park Plaza, Nashville, Tennessee, 37203 ("Assignee").

WHEREAS, Assignor and Assignee are parties to that certain Purchase Agreement, dated on even date herewith ("Purchase Agreement");

WHEREAS, Assignor is the owner of all right, title, and interest in, to and under those U.S. Trademark Registrations identified on Schedule 1 hereto for the word and design marks listed therein, and all common law rights associated therewith ("Trademarks") and has the full right to make the conveyance herein;

WHEREAS, Assignor has adopted, used, and is using the Trademarks;

WHEREAS, pursuant to the Purchase Agreement, Assignee wishes to acquire, and Assignor has agreed to assign to Assignee, its entire right, title and interest in, to and under the Trademarks, including any and all common law rights associated therewith, and said applications therefor, together with that part of the good will of the business connected with the use of and symbolized by the Trademarks.

NOW, THEREFORE, for ten dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor hereby unconditionally and irrevocably sells, assigns and transfers to Assignee its entire right, title, and interest in, to and under the Trademarks and said applications and registrations therefor, together with that part of the good will of the business connected with the use of and symbolized by the Trademarks and all rights and causes of action to recover past, present or future damages, royalties, fees, profits or other relief, including but not limited to, equitable and injunctive relief ensuing from infringement of the Trademarks.

Signatures to this Agreement transmitted by facsimile transmission, by electronic mail in "portable document format" (".pdf") form, or by any other electronic means intended to preserve the original graphic and pictorial appearance of a document, will have the same effect as paper documents bearing the original signature. This Agreement may be executed in counterparts, each of which shall be an original, but all of which together shall constitute one and the same instrument.

[Signatures Appear On Following Page]

IN WITNESS WHEREOF, the parties have executed this Agreement intending to be legally bound as of the Effective Date.

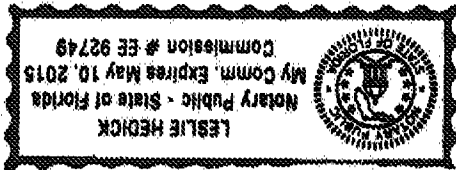
ASSIGNOR:

All American Physicians Associates, LLC

By: [Signature]
Name: Dan Polen
Title: Chief Financial Officer

STATE OF FLORIDA)
) ss:
COUNTY OF Hernando)

The foregoing Agreement was acknowledged before me this 7 day of July, 2011, by Dan Polen, Chief Financial Officer of All American Physicians Associates, LLC, a Florida limited liability company, on behalf of the company. He/she is personally known to me or who has produced _____ (type of identification) as identification.



[Signature]
NOTARY PUBLIC, STATE OF Florida
Leslie Hedick
(Print, Type or Stamp Commissioned Name of Notary Public)

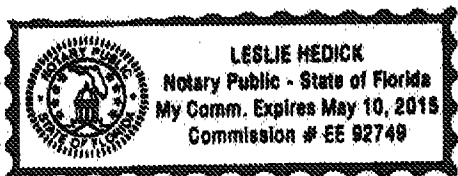
ASSIGNEE:

Access Health Care Physicians, LLC

By: [Signature]
Name: Dan Polen
Title: Chief Financial Officer

STATE OF FLORIDA)
) ss:
COUNTY OF Hernando)

The foregoing Agreement was acknowledged before me this 7 day of July, 2011, by Dan Polen, Chief Financial Officer of Access Health Care Physicians, LLC, a Florida limited liability company, on behalf of the company. He/she is personally known to me or who has produced _____ (type of identification) as identification.



[Signature]
NOTARY PUBLIC, STATE OF Florida
Leslie Hedick
(Print, Type or Stamp Commissioned Name of Notary Public)

Schedule 1

Trademarks

Trademark	App. No.	App. Filed	Reg. No.	Reg. Date	Goods/Services	Status
ALL AMERICAN PHYSICIANS ASSOCIATES	77732528	May 8, 2009	3,926,349	March 1, 2011	IC 044: physician services	Section 8 & 15 Affidavit with evidence of use due between March 1, 2016 and March 1, 2017 (or within the six month extension period thereafter)