

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM487719

<b>SUBMISSION TYPE:</b>	RESUBMISSION		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>RESUBMIT DOCUMENT ID:</b>	900460423		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
The Center for Orthopedic and Research Excellence, Inc.		06/04/2018	Corporation: DELAWARE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Banner/CORE Orthopedic Program, L.L.C.		
<b>Street Address:</b>	2901 N. Central Avenue, Suite 160		
<b>City:</b>	Phoenix		
<b>State/Country:</b>	ARIZONA		
<b>Postal Code:</b>	85012		
<b>Entity Type:</b>	Limited Liability Company: ARIZONA		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Serial Number:</b>	85643261	INDEPENDENCE EXPEDITION	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	6027923525		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Phone:</b>	6027923536		
<b>Email:</b>	steve@milliganlawless.com		
<b>Correspondent Name:</b>	Steven Lawrence		
<b>Address Line 1:</b>	Milligan Lawless, P.C.		
<b>Address Line 2:</b>	5050 N 40th Street, Suite 200		
<b>Address Line 4:</b>	Phoenix, ARIZONA 85018		
<b>NAME OF SUBMITTER:</b>	David Jacofsky		
<b>SIGNATURE:</b>	/david jacofsky/		
<b>DATE SIGNED:</b>	08/28/2018		
<b>Total Attachments: 0</b>			

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