

06-21-1999



101039337

6-16-99

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

New

Resubmission (Non-Recordation)
Document ID #

Correction of PTO Error
Reel # Frame #

Corrective Document
Reel # Frame #

Conveyance Type

Assignment License

Security Agreement Nunc Pro Tunc Assignment

Merger Effective Date
Month Day Year

Change of Name

Other

Conveying Party

Mark if additional names of conveying parties attached

Name Execution Date
Month Day Year

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name **ASSIGNMENT**

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

06/22/1999 DCDATES 00000252 194709 75410187 FOR OFFICE USE ONLY

01 FC:481 40.00 CH
02 FC:482 550.00 CH
03 FC:484 120.00 CH

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK
REEL: 1883 FRAME: 0911

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages Enter the total number of pages of the attached conveyance document including any attachments.

#

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)			Registration Number(s)		
<input type="text" value="75410187"/>	<input type="text" value="75409987"/>	<input type="text"/>	<input type="text" value="2221591"/>	<input type="text" value="2052514"/>	<input type="text" value="1768469"/>
<input type="text" value="75410186"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2131121"/>	<input type="text" value="2046993"/>	<input type="text" value="1730863"/>
<input type="text" value="75410183"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2110992"/>	<input type="text" value="1778816"/>	<input type="text" value="1720062"/>

Number of Properties Enter the total number of properties involved.

#

Fee Amount Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment: Enclosed Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

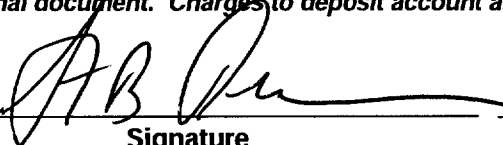
Deposit Account Number: #

Authorization to charge additional fees: Yes No

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. Charges to deposit account are authorized, as indicated herein.

Steven B. Pokotilow



6/15/99

Name of Person Signing

Signature

Date Signed

RECORDATION FORM COVER SHEET
CONTINUATION
TRADEMARKS ONLY

Conveying Party

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date

Month Day Year

Name

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship State of Incorporation/Organization

Receiving Party

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AK/A/T/A

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Individual General Partnership Limited Partnership

Corporation Association

Other

Citizenship/State of Incorporation/Organization

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Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

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Trademark Application Number(s)

Registration Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>

1697225	957912	<input type="text"/>
1665445	1134530	<input type="text"/>
1492075	1375699	<input type="text"/>
2164013	<input type="text"/>	<input type="text"/>
2101856	<input type="text"/>	<input type="text"/>
2026381	<input type="text"/>	<input type="text"/>
1979443	<input type="text"/>	<input type="text"/>

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "DOBI-SYMPLEX, INC.", CHANGING ITS NAME FROM "DOBI-SYMPLEX, INC." TO "SEATTLE ORTHOPEDIC GROUP, INC.", FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF FEBRUARY, A.D. 1999, AT 4:30 O'CLOCK P.M.



A handwritten signature in cursive script, reading "Edward J. Freel".

Edward J. Freel, Secretary of State

2292042 8100

991104411

AUTHENTICATION: 9634085

DATE: 03-17-99

TRADEMARK
REEL: 1883 FRAME: 0914

2-18-99

CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF INCORPORATION

DOBI-Symplex, Inc., a corporation organized and existing under and by virtue of the
General Corporation Law of the State of Delaware,

DOES HEREBY CERTIFY:

FIRST: That the Board of Directors of said Corporation, at a meeting duly held, adopted a
resolution proposing and declaring advisable the following amendment to the Certificate of
Incorporation of said Corporation:

RESOLVED, that the Certificate of Incorporation of DOBI-
Symplex, Inc. be amended by changing the First Article thereof so
that, as amended, said Article shall be and read as follows:

"FIRST: The name of the Corporation is
Seattle Orthopedic Group, Inc."

SECOND: That in lieu of a meeting and vote of stockholders, the stockholders have
given unanimous written consent to said amendment in accordance with the provisions of Section
228 of the General Corporation Law of the State of Delaware.

THIRD: That the aforesaid amendment was duly adopted in accordance with the applicable provisions of Sections 242 and 228 of the General Corporation Law of the State of Delaware.

IN WITNESS WHEREOF, said DOBI-Symplex, Inc. has caused this certificate to be signed by its Vice-President, this 18th day of February, 1999.

DOBI-SYMPLEX, INC.

By: 

Richard A. Stein
Vice President

#66761.1