



01-10-2002



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Our Ref.: 3659-1

Commissioner of Patents and Trademarks
Box Assignment, Washington, D.C. 20231

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): Intellicardia, Inc.</p> <p>Additional name/s of conveying party/ies attached? <input type="checkbox"/></p> <p>3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Assignment <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other</p> <p>Execution Date: <u>31 August 2001</u></p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: <u>CHF Solutions, Inc.</u> Internal Address: _____ Street Address: <u>3960 Broadway</u> _____ _____ City: <u>New York</u> State/Country: <u>New York</u> Zip: <u>10032</u></p> <p>Additional name/s & address/es attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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4. Application number(s) or patent number(s):
If this document is being filed together with a new application, the execution date of the application is: _____

<p>A. Patent Application No(s). (1) 09/454,605 (2) 09/476,100 (3) 09/476,099</p>	<p>B. Patent No(s). (1) 6,241,743 (2) 6,287,608 (3)</p> <p>Additional numbers attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Jeffry H. Nelson</u></p> <p>Internal Address: _____</p> <p>Street Address: <u>Nixon & Vanderhye P.C.</u> <u>1100 North Glebe Road</u> <u>8th Floor</u> City: <u>Arlington</u> State: <u>VA</u> Zip: <u>22201</u></p>	<p>6. Total number of applications & patents involved: <u>1</u></p> <p>7. Total fee (37 CFR 3.41) \$ <u>680.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account #14-1140</p> <p>8. The Commissioner is hereby authorized to charge any <u>deficiency</u>, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.</p>
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DO NOT USE THIS SPACE

9. Statements 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.

Jeffry H. Nelson Jeffry H. Nelson January 4, 2002
Name of Person Signing Signature Date
Reg. No. 30,481

Total number of pages including **original** cover sheet, attachments, and document: [4]

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RECORDATION FORM COVER SHEET

PATENTS ONLY

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Commissioner of Patents and Trademarks
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1. Name of conveying party(ies):

2. Name:

Street Address:

City:

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Zip:

4. Application number(s) or patent number(s):

A. Patent Application No(s).

(4) 09/476,096

(5) 09/506,234

(6) 09/547,104

(7) 09/618,759

(8) 09/660,195

A. (continued) Application No(s).

(9) 09/696,642

(10) 09/698,132

(11) 09/703,702

(12) 09/721,778

(13) 09/755,298

(14) 09/833,798

(15) 09/876,185

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, 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 "INTELLICARDIA, INC.", CHANGING ITS NAME FROM "INTELLICARDIA, INC." TO "CHF SOLUTIONS, INC.", FILED IN THIS OFFICE ON THE TENTH DAY OF SEPTEMBER, A.D. 2001, AT 9:05 O'CLOCK A.M.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1340672

DATE: 09-13-01

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