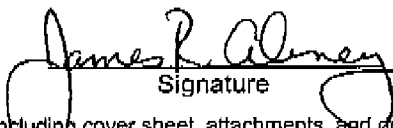


| Form PTO-1595 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) Tab settings | | RECORDATION FORM COVER SHEET PATENTS ONLY | | U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office | |
|---|--|---|--|---|--|
| To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof. | | | | | |
| 1. Name of conveying party(ies): Acumed Operating LLC | | 2. Name and address of receiving party(ies) Name: Acumed LLC Internal Address: _____ _____ _____ Street Address: 5885 N.W. Cornelius Pass Road _____ _____ City: Hillsboro State: OR Zip: 97124 Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | |
| 3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ | | | | | |
| Execution Date: December 10, 2002 | | | | | |
| 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: _____ A. Patent Application No.(s) _____ _____ _____ B. Patent No.(s) 6,162,224 _____ _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | |
| 5. Name and address of party to whom correspondence concerning document should be mailed: Name: James R. Abney, Esq. Internal Address: Kolisch Hartwell, P.C. _____ _____ Street Address: 520 S.W. Yamhill Street, Suite 200 _____ _____ City: Portland State: OR Zip: 97204 | | 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41).....\$ 40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: 11-1540 | | | |
| DO NOT USE THIS SPACE | | | | | |
| 9. Signature. James R. Abney, Esq.  May 26, 2004 Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and documents: 4 | | | | | |

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

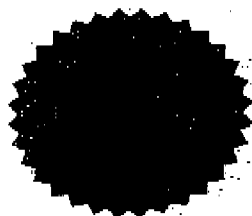
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Delaware

PAGE 1

The First 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 "ACUMED OPERATING LLC", CHANGING ITS NAME FROM "ACUMED OPERATING LLC" TO "ACUMED LLC", FILED IN THIS OFFICE ON THE ELEVENTH DAY OF DECEMBER, A.D. 2002, AT 4:31 O'CLOCK P.M.

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

3582644 8100

AUTHENTICATION: 2140589

020762045

DATE: 12-12-02

PATENT
REEL: 014669 FRAME: 0456

STATE OF DELAWARE
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 FILED 04:31 PM 12/11/2002
 020762045 - 3582644

**CERTIFICATE OF AMENDMENT
 OF
 A DELAWARE LIMITED LIABILITY COMPANY**

FIRST: The name of the limited liability company (the "Company") is:

ACUMED OPERATING LLC

SECOND: Article First of The Certificate of Formation of the Company is hereby amended to read in its entirety as follows:

"The name of the limited liability company is **ACUMED LLC**".

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment this 10th day of December, 2002.

/S/ Louhon Tucker
 Louhon Tucker
 Authorized Person

11 2002 12:38 PK COLSON HOSCHKE

0123801115 TO SHUTTLE WEAVER 12/03/02

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IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment this 10th day of December, 2002.



Louhon Tucker
Authorized Person

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