

07-11-2005

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

RE



103037453

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

**1. Name of conveying party(ies)**

CME Telemetrix Inc.

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

**3. Nature of conveyance/Execution Date(s):**

Execution Date(s) July 15, 2004

- ☐ Assignment ☐ Merger  
☐ Security Agreement ☒ Change of Name  
☐ Joint Research Agreement  
☐ Government Interest Assignment  
☐ Executive Order 9424, Confirmatory License  
☐ Other \_\_\_\_\_

**2. Name and address of receiving party(ies)**

Name: NIR Diagnostics Inc.

Internal Address: \_\_\_\_\_

Street Address: 44 Crawford Cr.

City: Campbellville

State: Ontario

Country: Canada Zip: L0P 1B0

Additional name(s) & address(es) attached? ☐ Yes ☒ No

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

☐ This document is being filed together with a new application.

A. Patent Application No.(s)

B. Patent No.(s) United States Patent 5,429,128  
United States Patent 5,939,327  
United States Patent 6,268,910  
United States Patent 5,361,758

Additional numbers attached? ☐ Yes ☒ No

**5. Name and address to whom correspondence concerning document should be mailed:**

Name: Gowling Lafleur Henderson LLP

Internal Address: \_\_\_\_\_

Street Address: Suite 2600, 160 Elgin Street

City: Ottawa

State: Ontario Zip: K1P 1C3

Phone Number: 613-233-1781

Fax Number: 613-563-9869

Email Address: www.gowlings.com

**6. Total number of applications and patents involved: 4**

**7. Total fee (37 CFR 1.21(h) & 3.41) \$ 160.00**

- ☐ Authorized to be charged by credit card  
☐ Authorized to be charged to deposit account  
☐ Enclosed  
☐ None required (government interest not affecting title)

**8. Payment Information**

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_

b. Deposit Account Number 50-1644

Authorized User Name Konrad Sechley (40,454)

**9. Signature:**

Signature

Date

Konrad Sechley (40,454)

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents: 3

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

**PATENT**  
**REEL: 016745 FRAME: 0221**

**PATENT**  
**REEL: 016745 FRAME: 0222**

6. The amendment has been duly authorized as required by sections 168 and 170 (as applicable) of the Business Corporations Act.  
*La modification a été dûment autorisée conformément aux articles 168 et 170 (selon le cas) de la Loi sur les sociétés par actions.*
7. The resolution authorizing the amendment was approved by the shareholders/directors (as applicable) of the corporation on  
*Les actionnaires ou les administrateurs (selon le cas) de la société ont approuvé la résolution autorisant la modification le*

2004-Jul-15

(Year, Month, Day)  
(année, mois, jour)

These articles are signed in duplicate.  
*Les présents statuts sont signés en double exemplaire.*

CME TELEMETRIX INC.

(Name of Corporation) (If the name is to be changed by these articles set out current name)  
(Dénomination sociale de la société) (Si l'on demande un changement de nom, indiquer ci-dessus le dénomination sociale actuelle).

By/  
Par:

*Stephen Curtis*

(Signature)  
(Signature)

Chief Financial Officer

(Description of Office)  
(Fonction)

07119 (03/2003)