		RECEIVED CENTRAL FAX CENTER
	06-01	-2006 U.S. DEPARTMENT OF COMMERCE
	Form PTO-1595 (Rev. 08/05) OMB No. 0651-0027 (exp. 6/30/2008) r.10325(United Steles Patent and Trademark Office
To the Director of the U.S. Patent and Trademark Office; Please record the attachesuments or the new address(
2	1. Name of conveying party(ies):	2. Name and address of receiving party(ies)
	GENECRAFT, INC.	Name: TRUBION PHARMACEUTICALS, INC.
2		Internal Address:
2	Additional nama(s) of conveying party(ics) attached?	Street Address:
\mathcal{D}	3. Nature of conveyance/Execution Date(s):	2404 Fath Augure Suite 1050
	Execution Date(s): September 18, 2003	2401 Forth Avenue, Suite 1050
	Assignment Merger X Change of Name	
	Security Agreement Joint Research Agreement	City:Seattle
	Government Interest Assignment	State: Washington
	Executive Order 9424, Confirmatory License	Country: United States of America Zip: 98121
	X Other Certificate of Amendment of GeneCraft	Additional name(s) & address(es) Yes X No
		This document is being filed together with a new application.
	11/088,693	B. Patent No.(6)
	Additional numbers attached?	Yes X No
	5, Name and address to whom correspondence concerning document should be malled:	6. Total number of applications and 1 patents involved:
	Name: Greta E. Noland MARSHALL, GERSTEIN & BORUN LLP	7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40
	Internal Address: 30906/41458CON1	Authorized to be charged by credit card
	Street Address: 233 S. Wacker Drive, Suite 6300	X Authorized to be charged to deposit account
	Sears Tower	
		None required (government interest not affecting title)
	Obierer	
	City: Chicago	8. Payment Information
	State: IL Zip: 60606-6357	a. Credit Card Last 4 Numbers
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300	a. Credit Card Last 4 Numbers
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number13-2855 5
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number13-2855 Authorized User Name
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Data b. Deposit Account Number 13-2855 5 Authorized User Name 8 May 26, 2006 2
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 13-2855 5 Authorized User Name 8 May 26, 2006 2 Date 9 Total number of paries including cover
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Data b. Deposit Account Number 13-2855 5 Authorized User Name 8 May 26, 2006 5 Date 9 Total number of pages Including cover sheet, attachments, and documents: 54 4
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number Authorized User Name May 26, 2006 Date Total number of pages Including cover sheet, attachments, and documents:
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number Authorized User Name May 26, 2006 Date Total number of pages Including cover sheet, attachments, and documents:
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number Authorized User Name May 26, 2006 Date Total number of pages Including cover sheet, attachments, and documents:
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number Authorized User Name May 26, 2006 Date Total number of pages Including cover sheet, attachments, and documents:
	State: IL Zip: 60606-6357 Phone Number: (312) 474-6300 Fax Number: (312) 474-0448 Email Address:	a. Credit Card Last 4 Numbers Expiration Data b. Deposit Account Number 13-2855 Authorized User Name May 26, 2006 Date Total number of pages Including cover sheet, attachments, and documents:

- {

ı

i.

ļ

PAGE 2/5 * RCVD AT 5/26/2006 10:56:30 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-2/1 * DNIS:2738300 * CSID:312 474 0448 * DURATION (mm-ss):01-12

PATENT REEL: 017936 FRAME: 0723



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 "GENECRAFT, INC,", CHANGING ITS NAME FROM "GENECRAFT, INC." TO "TRUBION PHARMACEUTICALS, INC.", FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2003, AT 8:33 O'CLOCK A.M.



3578196 8100 040370173

t Smith Hing

Harrier Smith Windsor, Secretary of State AUTHENTICATION: 3122193

DATE: 05-20-04

PAGE 3/5 * RCVD AT 5/26/2006 10:56:30 AM [Eastern Daylight Time] * SVR: USPTO-EFXRF-2/1 * DNIS: 2738300 * CSID: 312 474 0448 * DURATION (mm-ss): 01-12

PATENT REEL: 017936 FRAME: 0724

MAY 2 6 2006

CERTIFICATE OF AMENDMENT OF THE AMENDED AND RESTATED CERTIFICATE OF INCORPORATION OF GENECRAFT, INC.

GeneCraft, Inc., a corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware (the "Corporation"), does hereby certify:

FIRST: That at a meeting of the Board of Directors of the Corporation, resolutions were duly adopted setting forth a proposed amendment to the Amended and Restated Certificate of Incorporation of said Corporation, as amended (the "Restated Certificate"), declaring said amendment to be advisable. The resolution setting forth the proposed amendment is as follows:

<u>Resolved Further</u>: That, subject to the approval of the stockholders of the Company, Article 1 of the Restated Certificate is hereby amended to read in its entirety as follows:

"ARTICLE I

The name of the corporation is <u>Trubion Pharmaceuticals</u>, Inc. (the "Corporation")."

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

TEURD: That said amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

Remainder of Page Intentionally Left Blank

State of Delaware State of Delaware Secretary of State Division of Corporations Delivered 08:33 AM 09/22/2003 FILED 08:33 AM 09/18/2003 SRV 030603136 - 3578196 FILE

PAGE 4/5 * RCVD AT 5/26/2006 10:56:30 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-2/1 * DNIS:2738300 * CSID:312 474 0448 * DURATION (mm-ss):01-12

PATENT REEL: 017936 FRAME: 0725

1

IN WITNESS WHEREOF, the Corporation has caused this Certificate of Amendment to be executed by its duly authorized officer this 17 day of September 2003.

GENECRAFT, INC a Delaware corrotation By: NIM.

IDD M

1

Veter A. Thompson, MD, FACP President and Chief Executive Officer

PAGE 5/5 * RCVD AT 5/26/2006 10:56:30 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-2/1 * DNIS:2738300 * CSID:312 474 0448 * DURATION (mm-ss):01-12

U:BOD Meetings and Calls/September 2040 BOD Maching/Certif

PATENT REEL: 017936 FRAME: 0726

-2-

RECORDED: 05/26/2006