

PATENT ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
St. Jude Medical, Daig Division, Inc.	12/21/2005
RECEIVING PARTY DATA	
Name:	St. Jude Medical, Atrial Fibrillation Division, Inc.
Street Address:	6500 Wedgwood Road
City:	Maple Grove
State/Country:	MINNESOTA
Postal Code:	55311-3642
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	10295358
CORRESPONDENCE DATA	
Fax Number:	(952)351-1777
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	952-933-4700
Email:	acarlberg@sjm.com
Correspondent Name:	Reed R. Heimbecher
Address Line 1:	St. Jude Medical, AF Division, Inc.
Address Line 2:	14901 DeVeau Place
Address Line 4:	Minnetonka, MINNESOTA 55345-2126
ATTORNEY DOCKET NUMBER:	0G-040020US
NAME OF SUBMITTER:	Anne R. Carlberg
Total Attachments: 1 source=20060111_Cert_of_Name_Change_AF#page1.tif	

OP \$40.00 10295358

State of Minnesota

SECRETARY OF STATE

CERTIFICATE OF NAME CHANGE

I, Mary Kiffmeyer, Secretary of State of Minnesota, do hereby certify that the corporation listed below filed an amendment, or, in the case of a non-Minnesota corporation, a certificate of name change, changing its name with this office on the date listed below, and that the corporation has complied with the relevant laws of Minnesota with respect to that filing.

OLD NAME: St. Jude Medical, Daig Division, Inc.

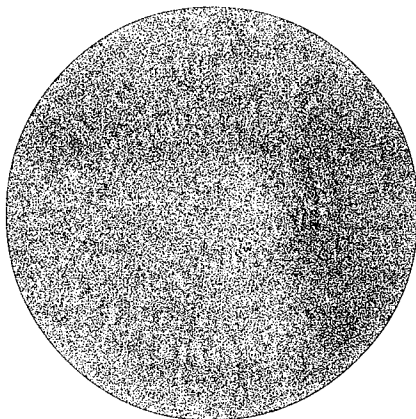
NEW NAME: St. Jude Medical, Atrial Fibrillation Division, Inc.

DATE AMENDMENT FILED: 12/22/2005

CHARTER NUMBER: 2M-1094

CHAPTER GOVERNED BY: 302A

This certificate has been issued on: January 11, 2006.



Mary Kiffmeyer
Secretary of State.