Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
EFFECTIVE DATE:	09/01/2003

CONVEYING PARTY DATA

Name	Execution Date
CME Telemetrix Inc.	09/01/2003

RECEIVING PARTY DATA

Name:	NIR Diagnostics Inc.
Street Address:	560 Parkside Drive
City:	Waterloo, Ontario
State/Country:	CANADA
Postal Code:	N2L 5Z4

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	09367859

CORRESPONDENCE DATA

Fax Number: (612)339-3061

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 612-373-6900
Email: phultman@slwk.com

Correspondent Name: Schwegman, Lundberg, Woessner & Kluth, P

Address Line 1: P.O. Box 2938
Address Line 2: Timothy B. Clise

Address Line 4: Minneapolis, MINNESOTA 55402

ATTORNEY DOCKET NUMBER:	1194.002US1

NAME OF SUBMITTER: Timothy B. Clise

Total Attachments: 4

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> PATENT REEL: 018902 FRAME: 0734

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Conveying Party: CME TELEMETRIX INC.

Receiving Party: NIR DIAGNOSTICS INC.

Docket No.: 1194.002US1

Attn: Mail Stop Assignment Recordation Services

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

We are transmitting herewith the following attached items (as indicated with an "X"):

- X A return postcard.
- X Recordation Form Cover Sheet (1 Page).
- X Certificate of Name Change (2 pgs.).
- X Authorization to Charge Deposit Account No. 190743 in the amount of \$40.00 for Recording the Name Change.

If not provided for in a separate paper filed herewith, Please consider this a PETITION FOR EXTENSION OF TIME for sufficient number of months to enter these papers and please charge any additional fees or credit overpayment to Deposit Account No. 19-0743.

SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.

Customer Number 21186

Atty: Timothy B Clise Reg. No. 40,957

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being filed using the USPTO's electronic filing system EFS-Web, and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 19th day of February, 2007.

PATRICIA A. HULTMAN

Name

Signature

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RECORDATION FORM COVER SHEET PATENTS ONLY

Atty Ref/Docket No.: 1365.0000001

Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof. 2. Name and address of receiving party(ies): 1. Name of conveying party(ies): NIR DIAGNOSTICS IN CME TELEMETRIX INC. 560 Parkside Drive Waterloo, Ontario N2L 5Z4 Additional name(s) of conveying party(ies) attached? Additional name(s) & address(es) attached? []Yes [X]No []Yes [X]No 3. Nature of conveyance: [] Assignment [] Merger [] Security Agreement [X] Change of Name [] Other **EXECUTION DATE OF CERTIFICATE OF NAME** CHANGE SEPTEMBER 1, 2003. 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: SERIAL NO.: 09/367,859, FILED SEPTEMBER 2, 1999 A. Patent Application No.(s) 6. Total number of applications and patents involved: 1 5. Name and address of party to whom correspondence concerning document should be mailed: 7. Total fee (37 CFR 3.41):\$ 40.00 Name: Timothy B Clise [XX] Authorized to be charged to deposit Address: account Schwegman, Lundberg, Woessner & Kluth, P.A. P.O. Box 2938 8. Please charge any additional fees or credit any over Minneapolis, MN 55402 payments to our Deposit account number: 19-0743 DO NOT USE THIS SPACE Statement 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. Timothy B Clise/Reg. No. 40,957 Signature Name of Person Signing

Mail documents to be recorded with required cover sheet information to:

Mail Stop Assignment Recordation Services Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Total number of pages including cover sheet: 3

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RECORDED: 02/19/2007

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	The amendment has been duly authorized as required by section Corporations Act. La modification and distinct all activates confidence and control authorized conformations are control.		
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. \	CME TELEME	TRIX INC.	_
	(Nance of Corporation) (If the name is to be change (Nancemination sociate de la société) (Si l'on demande un changemani	ed by these articles and out current name) de nom, indiquer of dessus la dénomination accade acades).	
	Stylen Center	Chief Financial Officer	
	(Signature)	(Pescription of Othos) (Pencilon)	
(caoscea) 81170 ·			

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