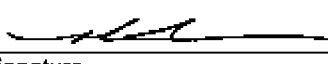


Attorney Docket No. PP001238.0115
2300-1238.11

FORM PTO-1595 (Rev. 6-93)		Recordation Form Cover Sheet (Patents Only)		U.S. Department of Commerce Patent and Trademark Office	
To the Honorable Asst. Commissioner for Patents. Please record the attached original documents or copy thereof					
1. Name of conveying party(ies): Children's Hospital Medical Center of Northern California Additional name(s) of conveying parties attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			2. Name and address of receiving party(ies) Children's Hospital & Research Center at Oakland 747 Fifty Second Street Oakland, California 94609-1809 Additional names and addresses 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 Dates: November 19, 2001					
4. Application Number(s) or Patent Numbers. If this document is being filed together with a new application, the execution date of the application is: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> A. Patent Application No(s): Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> <div style="width: 45%;"> B. Patent No(s): 7,063,949 <input checked="" type="checkbox"/> No </div> </div>					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Novartis Vaccines and Diagnostics, Inc. Intellectual Property - R440 P.O. Box 8097 Emeryville, CA 94662-8097			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"/> Charge Fees to Deposit Account <input checked="" type="checkbox"/> Charge any additional fees associated with this paper or during the pendency of this application, or credit any overpayment, to deposit account.		
			8. Deposit account number: 18-1648		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing is true and correct and any attached copy is a true of copy of the original document.</i> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> <u>Roberta L. Robins</u> Name of Person Signing Atty Reg. No. <u>33,208</u> </div> <div style="width: 30%; text-align: center;">  Signature </div> <div style="width: 30%; text-align: right;"> <u>8/17/07</u> Date </div> </div> <div style="text-align: right; margin-top: 10px;"> Total number of pages including cover sheet, attachments and document <u>3</u> </div>					
10. Change Correspondence Address to that of Part 5? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
OMB No. 0651-0011 (exp. 4/94)					
Mail documents to be recorded with required cover to: <div style="text-align: center; margin-top: 5px;"> Do not detach this portion Asst. Commissioner for Patents Box: Assignments Washington, D.C. 20231 </div>					

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PATENT
REEL: 019714 FRAME: 0286



State of California

SECRETARY OF STATE



I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

NOV 10 2001

Secretary of State



AUG 13 2007

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

NOV 30 2007

BILL JONES, Secretary of State

**CERTIFICATE OF AMENDMENT OF
RESTATED ARTICLES OF INCORPORATION
OF
CHILDREN'S HOSPITAL MEDICAL CENTER OF NORTHERN CALIFORNIA**

The undersigned certify that

1. They are the President and Secretary, respectively, of **Children's Hospital Medical Center of Northern California**, a California corporation (the "Corporation").
2. Article I of the Restated Articles of Incorporation of the Corporation is amended to read as follows:

"I.

The name of this corporation is **CHILDREN'S HOSPITAL & RESEARCH CENTER AT OAKLAND**".

3. The foregoing amendment of Restated Articles of Incorporation has been duly approved by the board of directors.
4. The foregoing amendment of Restated Articles of Incorporation has been duly approved by the required vote of the members.

We further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of our own knowledge.

Date: November 19, 2001



Antonie H. Paap, President



Adela Pang, Secretary

