## 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
Children's Hospital, Inc.	09/24/2007

## **RECEIVING PARTY DATA**

Name:	Nationwide Children's Hospital, Inc.
Street Address:	700 Children's Drive
City:	Columbus
State/Country:	ОНЮ
Postal Code:	43205

#### PROPERTY NUMBERS Total: 1

Property Type	Number
Patent Number:	5658785

## **CORRESPONDENCE DATA**

Fax Number: (312)474-0448

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

Phone: 312/474-6300

Email: docket@marshallip.com

Correspondent Name: Marshall Gerstein & Borun LLP

Address Line 1: 233 South Wacker Drive

Address Line 2: 6300 Sears Tower

Address Line 4: Chicago, ILLINOIS 60606

ATTORNEY DOCKET NUMBER: 29565/31975

NAME OF SUBMITTER: Audrey Nagelberg

Total Attachments: 2

source=Nationwide#page1.tif source=Nationwide#page2.tif

> PATENT REEL: 020617 FRAME: 0824

500483000



## Prescribed by:

The Ohio Secretary of State Central Ohio: (614) 466-3910 Toll Free: 1-877-SOS-PILE (1-877-767-3453)

www.sos.state.oh.us e-mail: busserv@sos.state.oh.us Expedite this Form: (Salect One)

Mail Form to one of the Following:

PO Box 1390

Columbus, OH 43218

Requires an additional (se of \$180 \*\*\*

PO Box 1028

Columbus, OH 43216

# Certificate of Amendment by Shareholders or Members

(Domestic) Filing Fee \$50.00

(CHECK ONLY ONE (1) I	30X)			
(1) Domestic for Profit Amended (122-AMAP)	PLEASE READ INSTRUCTIONS Amendment (125-AMDS)	(2) Domestic Nonprofit Amended (128-AMAN)	Amendment (128-AMD)	
	-		5 4	20
Complete the general inform	nation in this section for the box check	red above.	CLIENT	=
Name of Corporation	Children's Hospital, Inc.		(0	2001 SEP 2
Charter Number	593488		ERVICE	T-
Name of Officer	Steven J. Allen, M.D.	The Control of the Co	E C	AM 9:
Title	Chief Executive Officer		CENTER	:07
Please check if additional p	provisions attached.		${\mathcal D}$	
The above named Ohio cor	poration, does hereby certify that:			
A meeling of the	shareholders	directors ( nonpre	olit amended articles only)	
members was duly calle	ed and held on			
	(D:	a(e)		
vote was cast which entitled In a writing signed by al	was present in person or by proxy, b. I them to exercise	as the voting power of the ors (non-profit amended article	e corporation.	
articles of regulations or	bylaws permit.	such other proportion flor in	eas thair a majority as the	•
Clause applies if amended be	ox is checked.			
Resolved, that the following and take the place of the ex	amended articles of incorporations b isting articles of incorporation and all	e and the same are hereby amendments thereto.	adopted to supercede	

SECRETARY OF STATE

541

Page 1 of 2

Last Revised: May 2002

PATENT REEL: 020617 FRAME: 0825

FIRST: The name of the	ne corporation is: Natlonwide Children's Hosp	oltaf, Inc.
ECOND: The place in th	e State of Ohio where its principal office is locat	ed is in the City of:
(city, village or tow	nship)	(county)
HIRD: The purposes of	of the corporation are as follows:	_
l		
OURTH: The number of s	shares which the corporation is authorized to have (Does not apply to box (2))	ve outstanding is:
	shares which the corporation is authorized to har (Does not apply to box (2))	ve outstanding is:
REQUIRED lust be authenticated	(Does not apply to box (2))	ve outstanding is: September 24, 2007
REQUIRED ust be authenticated igned) by an authorized presentative	Authorized Representative	
REQUIRED ust be authenticated igned) by an authorized	Authorized Representative  Steven J. Allen, M.D. (Print Name)	September 24, 2007
REQUIRED ust be authenticated igned) by an authorized presentative	Authorized Representative Steven J. Allen, M.D.	September 24, 2007
REQUIRED ust be authenticated igned) by an authorized presentative	Authorized Representative  Steven J. Allen, M.D. (Print Name)	September 24, 2007
REQUIRED ust be authenticated igned) by an authorized presentative	Authorized Representative  Steven J. Allen, M.D. (Print Name)	September 24, 2007
REQUIRED lust be authenticated ligned) by an authorized presentative	Authorized Representative  Steven J. Allen, M.D.  (Print Name) Chief Executive Officer	September 24, 2007
REQUIRED ust be authenticated igned) by an authorized presentative	Authorized Representative  Steven J. Allen, M.D. (Print Name)	September 24, 2007

541

**RECORDED: 03/10/2008** 

Page 2 of 2

Last Revised: May 2002