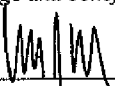


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Total number of pages including cover sheet, attachments, and document: <u>3</u>					
1. A. Name of conveying party(ies): ORGAN RECOVERY SYSTEMS, INC. 2570 EAST DEVON AVENUE DES PLAINES, ILLINOIS 60018 B. Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			2. A. Name and address of receiving party(ies): LIFELINE SCIENTIFIC, INC. 2570 EAST DEVON AVENUE DES PLAINES, ILLINOIS 60018 B. Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. A. 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 _____ B. Execution Date: <u>January 23, 2008</u>					
4. A. Patent Application No.(s) <u>11/802,059</u> Additional numbers attached? <input type="checkbox"/> Yes <input type="checkbox"/> No			B. Patent No.(s)		
C. Title of Application: <u>EX VIVO METHODS FOR TESTING ORGAN SYSTEM DISRUPTION</u>					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>William P. Berridge</u> Address: OLIFF & BERRIDGE, PLC P.O. Box 320850 Alexandria, VA 22320-4850 Phone Number: 703-836-6400 Fax Number: 703-836-2787			6. Total number of applications and patents involved: <u>1</u> 7. Please charge Deposit Account No. 15-0461 the total fee (37 CFR 3.41) in the amount of <u>\$40.00</u> . 8. Credit any overpayment or charge any underpayment to deposit account number 15-0461.		
9. Statement and signature. <i>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.</i>  _____ William P. Berridge Registration No. 30,024 Christopher J. Wheeler Registration No. 60,738 Date: <u>April 25, 2008</u>					

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File Number 6145-882-4



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

LIFELINE SCIENTIFIC, INC., INCORPORATED IN DELAWARE AND LICENSED TO TRANSACT BUSINESS IN THIS STATE ON FEBRUARY 02, 2001, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



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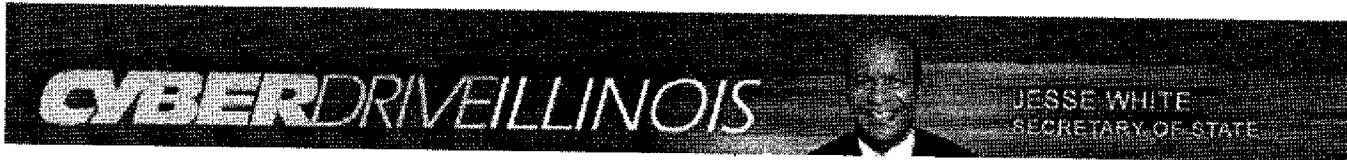
In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of APRIL A.D. 2008 .

Jesse White

SECRETARY OF STATE

PATENT

REEL: 020865 FRAME: 0247



SERVICES PROGRAMS PRESS PUBLICATIONS DEPARTMENTS CONTACT

CORPORATION FILE DETAIL REPORT

Entity Name	LIFELINE SCIENTIFIC, INC.	File Number	61458824
Status	GOODSTANDING		
Entity Type	CORPORATION	Type of Corp	FOREIGN BCA
Qualification Date (Foreign)	02/02/2001	State	DELAWARE
Agent Name	CHARLES BETO	Agent Change Date	09/17/2002
Agent Street Address	2570 E DEVON AVE	President Name & Address	DAVID KRAVITZ 2570 E DEVON AVE DES PLAINES 60018
Agent City	DES PLAINES	Secretary Name & Address	ROBERT M GOLDMAN 1510 W MONTANA CHICAGO 60614
Agent Zip	60018	Duration Date	PERPETUAL
Annual Report Filing Date	03/11/2008	For Year	2008
Old Corp Name	01/23/2008 - ORGAN RECOVERY SYSTEMS, INC.		

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