

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
Schering Corporation	05/02/2012
RECEIVING PARTY DATA	
Name:	Merck Sharp & Dohme Corp.
Street Address:	126 E. Lincoln Avenue
Internal Address:	RY86-2011A
City:	Rahway
State/Country:	NEW JERSEY
Postal Code:	07065
PROPERTY NUMBERS Total: 2	
Property Type	Number
Application Number:	11947608
Patent Number:	8173172
CORRESPONDENCE DATA	
Fax Number:	(732)594-4720
Phone:	732-594-1404
Email:	us_efs@merck.com
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
Correspondent Name:	Merck Sharp & Dohme Corp.
Address Line 1:	126 E. Lincoln Avenue
Address Line 2:	RY86-2011A
Address Line 4:	Rahway, NEW JERSEY 07065
ATTORNEY DOCKET NUMBER:	PD0706KQ2Q1
NAME OF SUBMITTER:	Stephanie Ricardo
Total Attachments: 1 source=Name Change - NJ#page1.tif	

CH \$80.00 11947608

REG-C-EA (08-05)

STATE OF NEW JERSEY DIVISION OF REVENUE

Mail to: PO Box 308 Trenton, NJ 08646

CGN

BUSINESS ENTITY AMENDMENT FILING

FEES REQUIRED

Complete the following information and sign in the space provided. Please note that once filed, the information on this page is considered public. Refer to the instructions for delivery/return options, filing fees and field-by-field requirements. Remember to remit the appropriate amount for this filing. Use attachments if more space is required for any field, or if you wish to add articles for the public record.

FILED MAY - 2 2012 STATE TREASURER

A. Business Name: Schering Corporation

Business Entity NJ 10-digit ID number: 7 9 5 4 4 0 1 0 0

B. Statutory Authority for Amendment: 14A: 9-1 (See Instructions for List of Statutory Authorities)

C. ARTICLE one OF THE CERTIFICATE of the above referenced business is amended to read as follows. (If more space is necessary, use attachment)

7954401000

D. Other Provisions: (Optional) The name of the corporation is: MERCK SHARP & DOHME CORP.

E. Date Amendment was Adopted: April 26, 2012

F. CERTIFICATION OF CONSENT/VOTING: (If required by one of the following laws cited, certify consent/voting)

N.J.S.A. 14A:9-1 et seq. or N.J.S.A 15A:9-1 et seq., Profit and Non-Profit Corps. Amendment by the Incorporators

[] Amendment was adopted by unanimous consent of the Incorporators.

N.J.S.A 14A:9-2(4) and 14A:9-4(3), Profit Corps., Amendment by the Shareholders

[X] Amendment was adopted by the Directors and thereafter adopted by the shareholders.

Number of shares outstanding at the time the amendment was adopted 100,000 and total number of shares entitled to vote thereon 100,000. If applicable, list the designation and number of each class/series of shares entitled to vote:

List votes for and against amendment, and if applicable, show the vote by designation and number of each class/series of shares entitled to vote:

Number of Shares Voting for Amendment 100,000

Number of Shares Voting Against Amendment

** If the amendment provides for the exchange, reclassification, or cancellation of issued shares, attach a statement indicating the manner in which same shall be effected.

N.J.S.A. 15A:9-4, Non-profit Corps., Amendment by Members or Trustees

The corporation has [] does not have [] members.

If the corporation has members, indicate the number entitled to vote _____, and how voting was accomplished:

[] At a meeting of the corporation. Indicate the number VOTING FOR _____ and VOTING AGAINST _____. If any class(es) of members may vote as a class, set forth the number of members in each class, the votes for and against by class, and the number present at the meeting:

[] Adoption was by unanimous written consent without a meeting.

If the corporation does not have members, indicate the total number of Trustees _____, and how voting was accomplished:

[] At a meeting of the corporation. The number of Trustees VOTING FOR _____ and VOTING AGAINST _____. [] Adoption was by unanimous written consent without a meeting.

G. AGENT/OFFICE CHANGE

New Registered Agent:

Registered Office: (Must be a NJ street address)

Street

City

Zip

H. SIGNATURE(S) FOR THE PUBLIC RECORD (See Instructions for Information on Signature Requirements)

Signature

[Handwritten Signature]

Title Vice President and Treasurer

Date 5/2/12

Signature

Title

Date

The above-signed certifies that the business entity has complied with all applicable NJ statutory filing requirements

2496392