FORM PTO-1618A Expires 06/30/99

MRD 4.14.99

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RECORDATION FORM COVER SHEET TDADEMADKS ONLY

	VIARRO UNL I				
TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).					
Submission Type	Conveyance Type				
X New	X Assignment License				
Resubmission (Non-Recordation) Document ID # Correction of PTO Error Reel # Frame #	Security Agreement Nunc Pro Tunc Assignment Effective Date Month Day Year 01191994				
	Change of Name				
Corrective Document Reel # Frame #	Other				
Conveying Party	Mark if additional names of conveying parties attached Execution Date				
Name American International Forest Products, Inc. Month Day Year 01191994					
Formerly					
Individual General Partnership	Limited Partnership X Corporation Association				
Other					
X Citizenship/State of Incorporation/Organizati	ion Oregon				
Receiving Party	Mark if additional names of receiving parties attached				
Name American International Facsimile Products, Inc.					
DBA/AKA/TA					
Composed of					
Address (line 1) 5560 SW 107th					
Address (line 2)					
Address (line 3) Beaverton City	Oregon 97005 State/Country Zip Code				
Individual General Partnership	Limited Partnership If document to be recorded is an assignment and the receiving party is				
X Corporation Association not domiciled in the United States, an appointment of a domestic					
Other Contract to the contract of the contract					
X Citizenship/State of Incorporation/Organization Oregon					
20/1999 DHGUYEN 00000201 1813463 FOR OFFICE USE ONLY					
C:481 40.00 DP					

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to: Mail documents to be recorded with required color of states, washington 1864/19231.

Commissioner of Patents and Trademarks, Box Assignments , Washington 1864/19231.

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FORM	PTO-1618B
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U.S. Department of Commerce Patent and Trademark Office TDADFMADK

OMB 0651-0027	TRADEMARK			
Domestic Representative Name and Address	Enter for the first Receiving Party only.			
Name				
Address (line 1)	DECEIVED			
Address (line 2)	APR 4			
Address (line 3)				
Address (line 4)				
Correspondent Name and Address Area Code and	Telephone Number 206-622-8484			
Name Valerie du Laney				
Address (line 1) Miller, Nash, Wiener, Hager & Carlsen L.L.P.				
Address (line 2) 4400 Two Union Square				
Address (line 3) 601 Union Street				
Address (line 4) Seattle, WA 98101-2352				
Pages Enter the total number of pages of the att including any attachments.	ached conveyance document # 3			
Trademark Application Number(s) or Registration	on Number(s)			
Enter either the Trademark Application Number or the Registration Nu				
Trademark Application Number(s)	Registration Number(s)			
	1813463			
Number of Properties Enter the total number of pr	operties involved. # 1			
Fee Amount Fee Amount for Properties L	isted (37 CFR 3.41): \$ 40.00			
Method of Payment: Enclosed X Deposit Account	eposit Account			
(Enter for payment by deposit account or if additional fees can be Deposit Account				
Authorization to	charge additional fees: Yes X No			
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. Charges to deposit account are authorized, as indicated herein.				
Valerie du Laney $\sqrt{2}$	41,3/99			
Name of Person Signing	Signature Date Signed			

ASSIGNMENT OF TRADEMARK

WHEREAS, AMERICAN INTERNATIONAL FOREST PRODUCTS, INC. ("Assignor"), 5560 SW 107th, Beaverton, Oregon, 97005, has adopted and is using the trademark "HOST FAX"" (the "Mark"), for which it has filed an application under serial number 74/313541, dated September 14, 1992, in the United States Patent and Trademark Office for registration; and

WHEREAS, AMERICAN INTERNATIONAL FOREST PRODUCTS, INC. desires to assign all of its rights in the Mark, and the good will associated with it, to AMERICAN INTERNATIONAL FACSIMILE PRODUCTS ("Assignee"), 5560 SW 107th, Beaverton, Oregon, 97005;

NOW, THEREFORE, for valuable consideration, receipt of which is acknowledged, Assignor hereby assigns to Assignee all of its right, title, and interest in and to the Mark and the application for registration thereof, serial number 74/313541, dated September 14, 1992, together with the good will of the business symbolized by the Mark.

The Commissioner of Patents and Trademarks is requested to issue to Assignee the certificate of registration for the trademark requested by the pending application.

AMERICAN INTERNATIONAL FOREST PRODUCTS, INC.

John W. Judy, Jr., President
Dated ____//9-94

STATE OF OREGON

County of Washington)

This instrument was acknowledged before me on Anuary 19. 1994, 1993, by John W. Judy, Jr., as President of AMERICAN INTERNATIONAL FOREST PRODUCTS, INC., an Oregon corporation.

OFFICIAL SEAL

MARJORIE F. HAUSAUER

NOTARY PUBLIC - OREGION

COMMISSION NO 029181

WY COMMISSION EXPLAIS 2013 01, 1997

Notary Public for Oregon

My commission expires:

PDX1-41900.1 21230 0001

REEL: 1885 FRAME: 0540

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Executed this 31"	day of March, 1999, at	DETLAND.	_ Oregoi

Max Anhoury, President, American International Facsimile Products, Inc., now known as CommercePath, Inc.

STATE OF OREGON) SS COUNTY OF MULTNOMAH)

This instrument was acknowledged before me on March 1, 1999, by Max Anhoury as president of American International Facsimile Products, now known as CommercePath, Inc.

Notary Public for Oregon

My commission expires: 9 28 61

