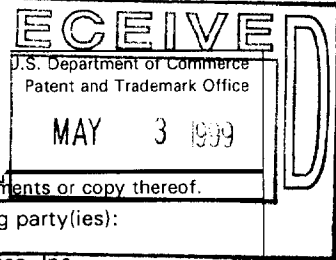


05-07-1999



FORM PTO-1594
1-31-92

RECORDATA



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5.3.99

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): Bay Apartment Communities, Inc. 4340 Stevens Creek Boulevard, Suite 275 San Jose, CA 95129</p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <input type="checkbox"/> Other _____</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and Address of receiving party(ies): Name: Avalon Bay Communities, Inc. Internal Address: Street Address: 2900 Eisenhower Avenue Third Floor Alexandria, VA 22314</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____</p> <p>Execution Date: <u>June 4, 1998</u></p>	<p><input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation-State <u>Maryland</u> <input type="checkbox"/> Other _____</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from Assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

<p>4. Application number(s) or registration number(s): A. Trademark Application No.(s) LEGENDARY SERVICE 75/281,251</p>	<p>B. Trademark registration No.(s)</p>
<p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Celia G. Spiritos, Esq.</u> Internal Address: <u>Hogan & Hartson LLP</u> _____ _____ Street Address: <u>8300 Greensboro Drive</u> <u>Suite 1100</u> City: <u>McLean</u> State: <u>VA</u> Zip: <u>22102</u></p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 3.41): \$ <u>40.00</u></p> <p><input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: <u>08-2550</u> (Attach duplicate copy of this page if paying by deposit account)</p>
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01 FC:481 40.00 DP

DO NOT USE THIS SPACE

9. 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.

Celia G. Spiritos, Esq. Celia G Spiritos 5/3/99
Name of Person Signing Signature Date

Total number of pages comprising cover sheet: 2

STATE OF MARYLAND

638720

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

DATE: JUNE 04, 1998

THIS IS TO ADVISE YOU THAT THE ARTICLES OF MERGER WITH A NAME CHANGE FOR BAY APARTMENT COMMUNITIES, INC. (MD)-SURVIVOR CHANGING TO AVALON BAY COMMUNITIES, INC. AND AVALON PROPERTIES, INC. (MD)-MERGING OUT WERE RECEIVED AND APPROVED FOR RECORD ON JUNE 4, 1998 AT 3:22 PM.

FEE PAID:

373.00



HARRY J. NOONAN
CHARTER SPECIALIST

A75-001

032

RECEIVED TIMEJUN 4 5:30PM

PRINT TIMEJUN 4 5:31PM

RECORDED: 05/03/1999

TRADEMARK
REEL: 1893 FRAME: 0107