

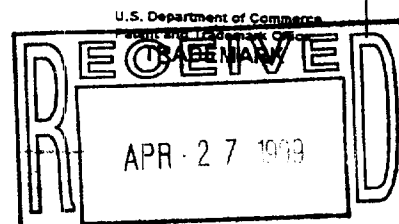
MKB 4-27-99

FORM PTO-1618A  
Expires 06/30/99  
OMB 0651-0027

05-10-1999



101033108  
RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY



TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)  
Document ID # \_\_\_\_\_
- Correction of PTO Error  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_
- Corrective Document  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

Conveyance Type

- Assignment  License **2169513**
- Security Agreement  Nunc Pro Tunc Assignment
- Merger  
Effective Date  
Month Day Year  
**12-18-97**
- Change of Name
- Other \_\_\_\_\_

Conveying Party

Mark if additional names of conveying parties attached

Name OfficeMax, Inc.

Execution Date  
Month Day Year  
**4-8-99**

Formerly \_\_\_\_\_

- Individual  General Partnership  Limited Partnership  Corporation  Association
- Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Ohio

Receiving Party

Mark if additional names of receiving parties attached

Name OMX, Inc.

DBA/AKA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 300 South Fourth Street, Suite 1100

Address (line 2) \_\_\_\_\_

Address (line 3) Las Vegas Nevada 89101  
City State/Country Zip Code

- Individual  General Partnership  Limited Partnership  If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)
- Corporation  Association
- Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Nevada

05/05/1999 JSHABAZZ 00000060 2169513

FOR OFFICE USE ONLY

01 FC:481 40.00 DP  
02 FC:482 150.00 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:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK  
REEL: 1894 FRAME: 0043

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

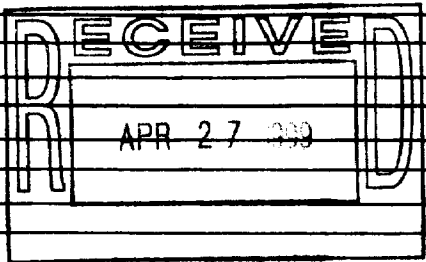
Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)



**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments. #

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2,169,513"/>	<input type="text" value="2,717,808"/>	<input type="text" value="2,141,396"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2,173,743"/>	<input type="text" value="2,179,294"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2,217,089"/>	<input type="text" value="2,160,687"/>	<input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

Authorization to charge additional fees: Yes  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.

Rhonda S. Ferguson  
Name of Person Signing

Signature

4-27-99  
Date Signed

**ASSIGNMENT**

*WHEREAS*, **OFFICEMAX, INC.**, an Ohio corporation with its principal office at 3605 Warrensville Center Road, Shaker Heights, Ohio 44122 ("**Assignor**"), has adopted and used, and is using, in the United States, the trademarks/service marks identified on Schedule A hereto (the "**Marks**") in connection with the operation and promotion of stores that offer for sale to the public a line of goods and services including, without limitation, any or all of the following: office products and supplies; computer hardware, software, peripherals, accessories and supplies; business machines; furniture and related merchandise; and copying and other business services; and

*WHEREAS*, **Assignor** is the owner of registrations of certain of the Marks, which registrations are also identified on Schedule A hereto; and

*WHEREAS*, **OMX, INC.**, a Nevada corporation with its principal office at 300 South Fourth Street, Suite 1100, Las Vegas, Nevada 89101 ("**Assignee**"), wishes to acquire all **Assignor**'s rights in and to the Marks;


*NOW, THEREFORE*, for good and valuable consideration, receipt of which is hereby acknowledged, **Assignor** does hereby assign to **Assignee**, effective *December 18, 1997*, all right, title, and interest in and to the Marks and the registrations identified on Schedule A hereto, together with the good will of the business symbolized by the Marks and with the right to recover for all remedies for past infringements of the Marks.

**OFFICEMAX, INC.**

By:   
\_\_\_\_\_  
Ross H. Pollock, Secretary

STATE OF OHIO                    )  
  ) SS:  
COUNTY OF CUYAHOGA )

On this 24 day of April 1999, before me personally came Ross H. Pollock, to me known to be Secretary of OfficeMax, Inc., a corporation of the State of Ohio, the Assignor above-named, and acknowledged that he executed the foregoing instrument and he did swear that he executed this Assignment of his free act on behalf of said Assignor and pursuant to authority duly received.

  
\_\_\_\_\_  
Notary Public

**JOHN D. PARKER, Attorney**  
**NOTARY PUBLIC - STATE OF OHIO**  
My commission has no expiration date.  
Section 147.02 R.C.

**SCHEDULE A**

**REGISTRATIONS**

<b><u>MARK</u></b>	<b><u>REGISTRATION NO.</u></b>	<b><u>CLASSES</u></b>
@MAX	2,169,513	42
LIKE NOTHING YOU'VE SEEN BEFORE!	2,173,743	35
MAXLEASE	2,217,089	35, 38, 42
OFFICEMAX MAXLEASE	2,717,808	35, 38, 42
OFFICEMAX TRIMAX SUPER CENTER AND DESIGN	2,179,294	35
QUICKFAX	2,160,687	16
QUICKMAX	2,141,396	42