FORM PTO-1618A

Expires 06/30/99

OMB 0651-0027

07-27-1999



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RECORDA	ATION FORM COVER SHEET	
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Submission Type	narks: Please record the attached original document(s) or copy(ies)  Conveyance Type	). 
XX New	Assignment License	
Resubmission (Non-Recordation) Document ID #	Security Agreement Nunc Pro Tunc Assig  Effective Date Month Day Year	nment
Correction of PTO Error Reel # Frame #		
Corrective Document	Change of Name	<del></del>
Reel # Frame #	Other	
Conveying Party	Mark if additional names of conveying parties attached  Execution Month Day	
Name James River Corporat:	cion of Virginia 081319	97
Formerly		
Individual General Partnership	Limited Partnership XX Corporation Assoc	iation
Other		
XX Citizenship/State of Incorporation/Organ	anization Virginia	
Receiving Party	Mark if additional names of receiving parties attached	
Name Fort James Corporat	ation	
DBA/AKA/TA		
Composed of		
	ad	
Address (line 1) 1650 Lake Cook Road		
Address (line 1) 1650 Lake Cook Road Address (line 2)		
Address (line 1)	IL 60015	
Address (line 2)  Address (line 2)  Address (line 3)  Deerfield  City  General Partnership	TL  State/Country  P Limited Partnership  If document to be recorded is an assignment and the receiving partner and the receiving partner to domiciled in the United State	rty is
Address (line 1)  Address (line 2)  Address (line 3)  Deerfield  City	State/Country  Dip Code    Code   Code   Code   Code   Code	rty is s, an ed.
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Address (line 2)  Address (line 2)  Address (line 3)  Deerfield  City  General Partnership  XX  Corporation  Association  Other  XX  Citizenship/State of Incorporation/Organ	IL  State/Country  P Limited Partnership  If document to be recorded is an assignment and the receiving part not domiciled in the United State appointment of a domestic representative should be attach (Designation must be a separate document from Assignment.)	rty is s, an ed.
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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 a 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

U.S. Department of Commerce Patent and Trademark Office

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<b>FORM</b>	PTO-1618B
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U.S. Department of Commerce Patent and Trademark Office TRADEMARK

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Domestic R	Representative Name an	d Address Enter for the first Re	ceiving Party only.		
Name					
Address (line 1)					
Address (line 2)					
Address (line 3)	•				
Address (line 4)					
Correspondent Name and Address Area Code and Telephone Number (920) 729-8540					
Name	Mary Eckert				
Address (line 1)	Fort James Corporation				
Address (line 2)	1915 Marathon Avenue				
Address (line 3)	ddress (line 3) P. O. Box 899				
Address (line 4) Neenah, WI 54957-0899					
Pages	Enter the total number of procluding any attachments	pages of the attached conveyance doos.	cument # 1		
Tradomark	Application Number(s)	or Registration Number(s)	Mark if additional numbers attached		
		the Registration Number (DO NOT ENTER BOT			
	demark Application Numbe		ration Number(s)		
110	demark Application Number	0695478			
		1621169			
Number of Properties Enter the total number of properties involved. # 2					
Fee Amour	nt Fee Amount	for Properties Listed (37 CFR 3.41):	\$ 65.00		
Method of Payment: Enclosed Deposit Account XX  Deposit Account					
(Enter for payment by deposit account or if additional fees can be charged to the account.)  Deposit Account Number:  # 50-0674					
		Authorization to charge additional fees:	Yes XX No		
Statement a	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.					
Mares To	le o m to	1 Mars Earl	- 1 00		
Mary Ec Name	of Person Signing	Signature	<u>July 22, 1999</u> Date Signed		

# Communication Afternation



## State Corporation Commission

## I Certify the Following from the Records of the Commission:

On August 13, 1997, by amendment of its articles of incorporation, the name of JAMES RIVER CORPORATION OF VIRGINIA was changed to FORT JAMES CORPORATION.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: October 16, 1998

Milliam J. Bridge, Clerk of the Commission

CIS20505



July 22, 1999

Fort James Corporation 1915 Marathon Avenue P O Box 899 Neenah, WI 54957-0899

**Box Assignments** Commissioner of Patents and Trademarks Washington, DC 20231

Re:

Recordal of Change of Name of James River Corporation of Virginia

to Fort James Corporation

#### Dear Sir/Madam:

Please record upon the assignment records of the U.S. Patent and Trademark Office the enclosed copy of the certification from the State Corporation Commission of Virginia setting forth the change of name of the company James River Corporation of Virginia to Fort James Corporation, effective August 13, 1997, for the following United States trademark registrations:

MARK	REGISTRATION NO.
ULTRA SERV	1621169
ULTRA-COTE 80	0695478

Also enclosed is the Trademark Recordation Form cover sheet.

Please withdraw the amount of \$65.00 from deposit account number 50-0674 to cover the cost of recordal of the enclosed document. If the amount is inadequate, please draw the additional amount from deposit account number 50-0674.

Respectfully submitted,

Mary E. Eckert, Paralegal

(920) 729-8540

**Enclosures:** 

Duplicate copy of transmittal

Trademark Recordation Form Cover Sheet Copy of certified change of name document

Postcard Receipt

**CERTIFICATION UNDER 37 CFR 1.8(a)** 

I hereby certify that this Request for Recordal of Change of Name and the documents referred to as attached therein are being deposited with the United States Postal Service on this date, July 22, 1999, in an envelope addressed to: Box Assignments, Commissioner of Patents and Trademarks, Washington, DC 20231 Mary Eckert 7/22/97

TRADEMARK REEL: 001934 FRAME: 0557