

10-05-1999



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### 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
  - Security Agreement  Nunc Pro Tunc Assignment
  - Merger  Change of Name
  - Other
- Effective Date  
Month Day Year

#### Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

- Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship/State of Incorporation/Organization

#### Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

- Individual  General Partnership  Limited Partnership  Association

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

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.)

#### FOR OFFICE USE ONLY

10/05/1999 MTHAI1 00000065 1267156

01 FC:481 40.00 OP  
02 FC:482 350.00 OP

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: 001969 FRAME: 0601

**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"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="text" value="1,267,156"/>	<input type="text" value="0,693,844"/>	<input type="text" value="0,785,203"/>
<input type="text" value="1,397,684"/>	<input type="text" value="0,826,859"/>	<input type="text" value="0,820,743"/>
<input type="text" value="0,820,742"/>	<input type="text" value="0,905,518"/>	<input type="text" value="1,695,612"/>

**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.

Edmund V. McCann

Name of Person Signing

Signature

September 30, 1999

Date Signed

RECORDATION FORM COVER SHEET  
CONTINUATION  
TRADEMARKS ONLY

**Conveying Party**

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship State of Incorporation/Organization

**Receiving Party**

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

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Mark if additional numbers attached

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**Trademark Application Number(s)**

**Registration Number(s)**

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1,675,119	1,748,523	1,666,766
1,666,767	75/353919	1,610,590
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## ASSIGNMENT

THIS IS AN ASSIGNMENT from **Spring Air Mattress Company**, a New Jersey Corporation, whose principal place of business is located at 170 Schuyler Avenue, Post Office 447, North Arlington, New Jersey 07032 to Spring Air Partners-New Jersey, Inc., a New Jersey Corporation, whose principal place of business is located at 134 Spring Street, Suite 204, New York, New York 10012.

WHEREAS, Spring Air Mattress Company has adopted and used in its business and is the owner of the following U.S. trademarks:

Trademark	Registration/Serial No.
<b>Fifth Avenue Collection</b>	1,267,156
<b>Spine-Saver</b>	0,693,844
<b>Select-A-Pedic</b>	0,785,203
<b>Custom Rest</b>	1,397,684
<b>Perm-A-Quilt</b>	0,826,859
<b>Ultra-Pedic</b>	0,820,743
<b>Vita-rest</b>	0,820,742
<b>Dual Pedic</b>	0,905,518
<b>Posture Corrector</b>	1,695,612
<b>Stress Reliever</b>	1,675,119
<b>Comfort Enhancer</b>	1,748,523
<b>Spinal Adjuster</b>	1,666,766
<b>Custom Cushion</b>	1,666,767
<b>Dura Zone</b>	75/353,919
<b>Ortho Fitness</b>	1,610,590

WHEREAS, Spring Air Partners-New Jersey, Inc. is desirous of acquiring the entire right, title and interest in and to said marks;

NOW, THEREFORE, in consideration of and in exchange for good and valuable considerations, the receipt and sufficiency of which is hereby acknowledged, said Spring Air Mattress Company does hereby sell, assign, transfer and set over unto said Spring Air Partners-New Jersey, Inc. the entire right, title and interest in, to and under said trademarks, together with the goodwill of the business in connection with which said marks are used.

Executed at N. Arlington NJ USA  
CITY STATE COUNTRY

this 17 day of February, 1998.

Spring Air Mattress Company

Larry Bagon  
Witness  
(Signature)

Paul Bagon  
Authorized Signing Officer  
(Signature)

LARRY BAGGON  
Witness  
(please type or print clearly)

PAUL BAGGON PRESIDENT  
Name and title of Authorized  
Signing Officer  
(please type or print clearly)

DECLARATION OF WITNESS

I, LARRY S BAGOON  
First Name Middle Name or Initials Last Name

of 635 SCHUYLER AVE. #10 LYNDHURST  
Number and Street City

N.J. 07071 USA  
State Postal Code Country

hereby declares that I was personally present and did see

PAUL BAGOON  
(Name of Authorized Signing Officer for Spring Air Mattress Company)

who is personally known to me to be an Authorized Signing Officer of the Assignor named above (namely, Spring Air Mattress Company) duly sign and execute the same.

Executed at N. ARLINGTON N.J. USA  
CITY STATE COUNTRY

this 17 day of February, 1999.

Larry Bagoon  
Witness  
(Signature)

LARRY BAGOON  
Witness Name  
(please type or print clearly)

A C K N O W L E D G E M E N T

The above named Assignee (Spring Air Partners-New Jersey, Inc.) hereby acknowledges this assignment.

Executed at North Arlington NJ USA  
CITY STATE COUNTRY

this 17 day of february, 1998.

Spring Air Partners-New Jersey, Inc.



Witness  
(Signature)



Authorized Signing Officer  
(Signature)

Louis Pushman

Witness  
(please type or print clearly)

Paul Bagson Pres.

Name and title of Authorized Signing Officer  
(please type or print clearly)