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

04-10-2000



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U.S. Pepertment of Commerce Patent and Trademark Office TRADEMARK

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	ION FORM COVER SHEET
	EMARKS ONLY
	s: Please record the attached original document(s) or copy(ies).
Submission Type	Conveyance Type X Assignment License
New	Assignment
Resubmission (Non-Recordation) Document ID #	Security Agreement Nunc Pro Tunc Assignme
Correction of PTO Error	Merger Effective Date Month Day Year
Reel # Frame #	12 31 1999
Corrective Document	Change of Name
Reel # Frame #	Other
Conveying Party	Mark if additional names of conveying parties attached Execution Date
N	Month Day Yea 12 31 199
Name Stoneridge, Inc.	
Formerly	
Individual General Partnership	Limited Partnership X Corporation Associatio
Individual General Partnership	
Other	
X Citizenship/State of Incorporation/Organiz	zation Ohio
Citizenship/otate of meetperaner game	
Receiving Party	Mark if additional names of receiving parties attached
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Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA	Mark if additional names of receiving parties attached
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Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA	Mark if additional names of receiving parties attached
Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA Composed of Address (line 1) 300 Dan Road	Mark if additional names of receiving parties attached
Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA Composed of Address (line 1) 300 Dan Road Address (line 2)	Mark if additional names of receiving parties attached
Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA Composed of Address (line 1) 300 Dan Road Address (line 2) Address (line 3) Canton	Mark if additional names of receiving parties attached Massachusetts State/Country Zip Code
Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA Composed of Address (line 1) 300 Dan Road Address (line 2)	Massachusetts State/Country Limited Partnership Mark if additional names of receiving parties attached 02021 Zip Code If document to be recorded is an assignment and the receiving party is
Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA Composed of Address (line 1) 300 Dan Road Address (line 2) Address (line 3) Canton City	Massachusetts State/Country Limited Partnership Limited Partnership Massachusetts State/Country 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
Receiving Party Name Stoneridge Control Devices, Inc. DBA/AKA/TA Composed of Address (line 1) 300 Dan Road Address (line 2) Address (line 3) Canton City Individual General Partnership X Corporation Association	Massachusetts State/Country Limited Partnership Limited Partnership Massachusetts State/Country 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
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Public Surgen reporting for this Collection of Minimum of Minimum

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: 002046 FRAME: 0789

FORM PTO- Expires 06/30/99 OMB 0651-0027	1618B Page 2	U.S. Department of Commerce Patent and Trademark Office TRADEMARK		
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 (216) 861-7450				
Name	Rosie Wenstrup			
Address (line 1)	Baker & Hostetler			
Address (line 2)	3200 National City Center			
Address (line 3)	1900 East 9th Street			
Address (line 4)	Cleveland, OH 44114-3485			
Pages	Enter the total number of pages of the attached conveyance document including any attachments.	# 1		
Trademark Application Number(s) or Registration Number(s) Mark if additional numbers attached				
	e Trademark Application Number <u>or</u> the Registration Number (DO NOT ENTER BOTH number) demark Application Number(s)			
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7001010				
Number of Properties Enter the total number of properties involved. # 1				
Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$ 40				
	f Payment: Enclosed Deposit Account X			
Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: # 02-0396				
Authorization to charge additional fees: Yes \overline{X} No \overline{X}				
Statement and Signature				
atta	ne best of my knowledge and belief, the foregoing information is true and correct shed copy is a true copy of the original document. Charges to deposit account a cated herein.	ा and any ure authorized, as		

CM Wanstra Signature

Rosie Wenstrup Name of Person Signing

> TRADEMARK REEL: 002046 FRAME: 0790

Date Signed

ASSIGNMENT OF TRADEMARK APPLICATION

WHEREAS, Stoneridge, Inc., an Ohio corporation, having an address of 9400 East Market Street, Warren, Ohio 44484, U.S.A. ("Assignor"), has adopted and is using the trademark covered by U.S. application Serial No. 75/516,423; and

WHEREAS, Assignor is the owner of United States Trademark Application No. 75/516,423 for the mark "Pollak", filed on July 9, 1998; and

WHEREAS, Stoneridge Control Devices, Inc., a Massachusetts corporation, having its principal place of business at 300 Dan Road, Canton, Massachusetts 02021, U.S.A. ("Assignee"), is desirous of acquiring said trademark application, and the good will associated therewith; and

WHEREAS, Assignee is the successor to the business of Assignor to which the mark covered by said application pertains, said business being ongoing and existing;

NOW, THEREFORE, for good and valuable consideration, Assignor does hereby assign unto Assignee all right, title, and interest in and to the said trademark, together with the good will of the business symbolized by the said trademark and the above-identified registration of the said trademark.

December <u>31</u>, 1999.

STONERIDGE, INC

By Onn

STATE OF OHIO

) SS:

COUNTY OF CUYAHOGA)

On this 31st day of December, 1999, before me personally came Avery S. Cohen ____, to me known to be ____the Secretary ____ of Stoneridge, Inc., an Ohio corporation, 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

SHEREEN WILLENS, Notary Public Residence – Summit County State Wide Jurisdiction, Ohio My Commission Expires July 22, 2003

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RECORDED: 03/01/2000

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