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To the Honorable Commissioner of Patent

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ied original documents or copy thereof.

1. Name of conveying party(ies): Membership Marketing Services, Inc.

- Individual(s)
- Association
- General Partnership
- Limited Partnership
- Corporation-State
- Other

Additional name(s) of conveying party(ies) attached?

Yes No

2. Name and address of receiving party(ies):

Name: Access Development Corporation

Address: 1012 Beardsley Place

City: Salt Lake City State: Utah ZIP: 84119

- Individual(s) citizenship _____
- Association _____
- General Partnership _____
- Limited Partnership _____
- Corporation-State Utah
- Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from Assignment)
Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance: Change of Name

Execution Date: March 31, 2000

4. Application number(s) or registration number(s):

A. Trademark Application No.(s):

B. Trademark Registration No.(s): 1,876,934

Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning this document should be mailed:

Name: David L. Stott
Trask, Britt & Rossa
P.O. Box 2550
Salt Lake City, UT 84110-2550

6. Total number of applications and registrations involved:

CERTIFICATE OF MAILING

I hereby certify that this paper or file, along with any attachments referred to or identified as being attached or enclosed, as being deposited with the United States Postal Service as First Class Mail (under 37 C.F.R. § 1.8(a)) on the date of deposit shown below with sufficient postage and in an envelope addressed to Box Assignment, Commissioner of Patents and Trademarks, Washington, D.C. 20231.

4/06/00

Date of Deposit

Darlene Foucault
Signature of registered practitioner or other person having reasonable basis to expect mailing to occur on date of deposit shown pursuant to 37 C.F.R. § 1.8(a)(1)(ii)

Darlene Foucault

Typed/print name of person whose signature is contained above

7. Total fee (37 C.F.R. § 3.41) \$40.00

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8. The Commissioner is hereby authorized to charge any deficiency in the required fee or credit any overpayment to deposit account number 20-1469.

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9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct.

David L. Stott

Name of Person Signing

David L. Stott
Signature

April 6, 2000
Date

Attorney Docket No. 2785-TM1550US

Total number of pages including cover sheet, attachments and document: 2

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OCTOBER 30, 1999