

04-24-2000

Handwritten: 4.18.00



101329911

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

APR 18 2000

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
2 28 00

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name Myvesta.org, Inc.

2 28 00

Formerly Debt Counselors of America, Inc.

- Individual General Partnership Limited Partnership Corporation Association
- Other

Citizenship/State of Incorporation/Organization Maryland

Receiving Party

Mark if additional names of receiving parties attached

Name Myvesta.org, Inc.

DBA/AKA/TA

Composed of

Address (line 1) Suite 301

Address (line 2) 6 Tatt Court

Address (line 3) Rockville Maryland 20850
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 Maryland

04/24/2000 JSHABAZZ 00000116 75950317

FOR OFFICE USE ONLY

01 FC:481 40.00 OP
02 FC:482 725.00 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: 002058 FRAME: 0256

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)

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.

Steve Knude
Name of Person Signing


Signature

9/10/99
Date Signed

**RECORDATION FORM COVER SHEET
CONTINUATION
TRADEMARKS ONLY**

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

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

Conveying Party

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date

Month Day Year

Name Myvesta.org, Inc.

2 28 00

Formerly Debt Counselors of America, Inc.

Individual General Partnership Limited Partnership Corporation Association

Other _____

Citizenship State of Incorporation/Organization Maryland

Receiving Party

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name Myvesta.org, Inc.

DBA/AKA/TA _____

Composed of _____

Address (line 1) Suite 301

Address (line 2) 6 Taft Court

Address (line 3) Rockville Maryland 20850
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 the Assignment.)
 Corporation Association

Other _____

Citizenship/State of Incorporation/Organization Maryland

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)

<u>75443611</u>	<u>75831937</u>	
<u>75505231</u>	<u>75478501</u>	
<u>75505230</u>	<u>75478079</u>	
<u>75950310</u>	<u>75477179</u>	
<u>75900247</u>	<u>75561803</u>	
<u>75605236</u>		
<u>75900095</u>		

State of Maryland
**Department of
Assessments and Taxation**



Parris N. Glendening
Governor

Ronald W. Wineholt
Director

Paul B. Anderson
Administrator

Charter Division

DEBT COUNSELORS OF AMERICA
JUDITH BRANZELLE
STE 301
6 TAFT CT
ROCKVILLE

MD 20850

Date: 03-27-2000

This letter is to confirm acceptance of the following filing:

ENTITY NAME: MYVESTA.ORG, INC.
DEPARTMENT ID : D04014114
TYPE OF REQUEST : ARTICLES OF AMENDMENT / NAME CHANGE
DATE FILED : 02-28-2000
TIME FILED : 10:06-AM
RECORDING FEE : \$20.00
FILING NUMBER : 1000154035000000
CUSTOMER ID : 0000336448
WORK ORDER NUMBER : 0000282438

PLEASE VERIFY THE INFORMATION CONTAINED IN THIS LETTER. NOTIFY THIS DEPARTMENT IN WRITING IF ANY INFORMATION IS INCORRECT. INCLUDE THE CUSTOMER ID AND THE WORK ORDER NUMBER ON ANY INQUIRIES. EVERY YEAR THIS ENTITY MUST FILE A PERSONAL PROPERTY RETURN IN ORDER TO MAINTAIN ITS EXISTENCE EVEN IF IT DOES NOT OWN PERSONAL PROPERTY. A BLANK RETURN WILL BE MAILED BY FEBRUARY OF THE YEAR FOR WHICH THE RETURN IS DUE.

301 West Preston Street, Baltimore, Maryland 21201
Telephone (410) 767-1350
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

0000571742

chtacc

TRADEMARK
REEL: 002058 FRAME: 0259

ENTITY TYPE: ORDINARY BUSINESS - NON-STOCK
STOCK: N
CLOSE: N
EFFECTIVE DATE: 02-28-2000
PRINCIPAL OFFICE: STE 301
5 TAFT CT
ROCKVILLE MD 20850-0000
RESIDENT AGENT: STEPHEN J. RHODE
1680 E. GUDE DRIVE
ROCKVILLE MD 20850-0000

COMMENTS:
THIS AMENDMENT RECORD INDICATES THE NAME CHANGE FROM:
FROM: DEBT COUNSELORS OF AMERICA, INC.
TO: MYVESTA. ORG, INC.

DOCID

RECORDED: 04/18/2000

TRADEMARK
REEL: 002058 FRAME: 0260