

FORM PTO-1618A  
Expires 06/30/98  
OMB 0651-0027

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

### 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  Effective Date  
Month Day Year
- Change of Name
- Other

#### Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year  
MAY 12, 2000

Name ATLANTIC RECORDING CORPORATION

Formerly

- Individual  General Partnership  Limited Partnership  Corporation  Association
- Other
- Citizenship/State of Incorporation/Organization DELAWARE

#### Receiving Party

Mark if additional names of receiving parties attached

Name LAVA TRADEMARK HOLDING COMPANY LLC

DBA/AKA/TA

Composed of

Address (line 1) 1290 AVENUE OF THE AMERICAS, NEW YORK, NEW YORK 10104

Address (line 2)

Address (line 3)  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 LIMITED LIABILITY CORPORATION
- Citizenship/State of Incorporation/Organization DELAWARE

#### FOR OFFICE USE ONLY

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 **TRADEMARK**  
700001199 Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231  
REEL: 002059 FRAME: 0239

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

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

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" value="2,084,441"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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.

ROBERT T. SCHERER

JUNE 20, 2000

Name of Person Signing

Signature

Date Signed



DATE: JUNE 20, 2000

**CONFIDENTIAL FAX TRANSMISSION**

**TO: U.S. Patent & Trademark Office  
Attn: ASSIGNMENT BRANCH**

**FAX #: 703-306-5995**

**FROM: Lynn DeFeo/Time Warner Inc.  
FAX #: 212/258-3006**

**NUMBER OF PAGES INCLUDING THIS COVER: 4**

**If you do not receive all pages, please contact us at: 212-484-8920  
OUR FAX NUMBER: (212) 258-3006**

**This message is intended only for the use of the individual to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law.** If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address via the U.S. Postal Service. Thank you for your cooperation.

**COMMENTS: ASSIGNMENT OF REGISTRATION NO. 2,084,441 FOR "LAVA" IN I.C. 9 FROM ATLANTIC RECORDING CORPORATION TO LAVA TRADEMARK HOLDING COMPANY LLC, WITH DEPOSIT ACCOUNT AUTHORIZATION.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_