

07-05-2000



101397059

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

MRD
REMRD
2-14-00

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

Name

Execution Date
Month Day Year

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
 - 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.)

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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: 002092 FRAME: 0228

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" value="75844973"/>	<input type="text" value="75762212"/>	<input type="text" value="75825713"/>	<input type="text" value="1973358"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="75846176"/>	<input type="text" value="75831924"/>	<input type="text" value="75825715"/>	<input type="text" value="1509535"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="75762406"/>	<input type="text" value="75825716"/>	<input type="text" value="75915317"/>	<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.

Cynthia K. Nicholson

6-26-00

Name of Person Signing

Signature

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

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship State of Incorporation/Organization

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Enter Additional Receiving Party

Mark if additional names of receiving parties attached

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DBA/AK/A/T/A

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City

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Registration Number(s)

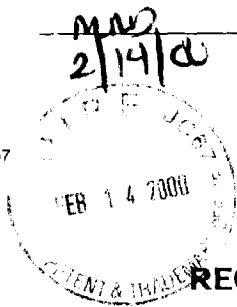
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02-14-2000

U.S. Patent & TMOc/TM Mail Rcpt Dt. #57



03-28-2000



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13899-30

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

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Month Day Year

Name

Formerly

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DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

- 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

03/28/2000 DCORTES 00000001 738479 3

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01 FC:481
02 FC:482

1.00 UP
11.00 UP

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TRADEMARK
REEL: 002092 FRAME: 0231

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 (202) 861-6243

Name

Cynthia K. Nicholson, Esquire

Address (line 1)

Piper Marbury Rudnick & Wolfe, LLP

Address (line 2)

1200 Nineteenth Street, N.W.

Address (line 3)

Washington, DC 20036-2412

Address (line 4)

PagesEnter the total number of pages of the attached conveyance document
including any attachments.

#

3

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)**

75/844,973

75/762,212

75/825,713

75/846,176

75/831,924

75/825,715

1,973,358

75/762,406

75/825,716

75/915,317

1,509,535

Number of Properties

Enter the total number of properties involved.

#

18

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

465.00

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:

#

50-1150

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.*

Cynthia K. Nicholson



02/14/00

Name of Person Signing

Signature

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

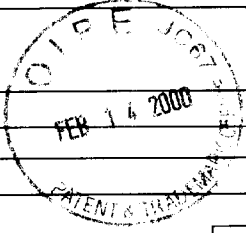
Name

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[Text box for Execution Date]

Formerly

[Text box for Formerly]



Individual General Partnership Limited Partnership Corporation Association

Other [Text box]

Citizenship State of Incorporation/Organization [Text box]

Receiving Party

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

[Text box for Name]

DBA/AK/A/T/A

[Text box for DBA/AK/A/T/A]

Composed of

[Text box for Composed of]

Address (line 1)

[Text box for Address (line 1)]

Address (line 2)

[Text box for Address (line 2)]

Address (line 3)

[Text box for Address (line 3) - City]

[Text box for Address (line 3) - State/Country]

[Text box for Address (line 3) - Zip Code]

City

State/Country

Zip Code

Individual General Partnership Limited Partnership

Corporation Association

Other [Text box]

Citizenship/State of Incorporation/Organization [Text box]

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Trademark Application Number(s)

Registration Number(s)

75/766,566	[]	[]
75/762,210	[]	[]
75/915,315	[]	[]
75/915,309	[]	[]
75/915,311	[]	[]
75/915,306	[]	[]
75/848,711	[]	[]

[]	[]	[]
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[]	[]	[]
[]	[]	[]



Handwritten initials

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Washington, D.C. 20036-2412
www.piperrudnick.com

PHONE (202) 861-3900
FAX (202) 223-2085

WRITER'S INFORMATION

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FAX (202) 223-2085



02-14-2000

U.S. Patent & TMO/c/TM Mail Rcpt Dt. #57

February 14, 2000

Via Hand Courier

Assistant Commissioner for Trademarks
BOX ASSIGNMENT / FEE
2900 Crystal Drive
Arlington, VA 22202-3513

Re: Change of Name Document
Conveying Party: Isky, Inc.
Formerly: Sky Alland Research, Inc.
Our Ref. 13899-30

Dear Sir / Madam:

Enclosed for recordation is an Articles of Amendment wherein the corporate name of Sky Alland Research, Inc. has been changed to ISKY, Inc., effective February 4, 2000. A check for \$465.00 to cover the recordation and filing fee is also enclosed. If there are any additional fees due in connection with the filing of this document, please charge the fees to our Deposit Account No. 50-1150.

Please send all correspondence and the original document stamped with the reel and frame numbers to:

Cynthia K. Nicholson, Esquire
Piper Marbury Rudnick & Wolfe, LLP
1200 Nineteenth Street, N.W.
Washington, DC 20036-2412

FEB 16 2000

If you have any questions, please do not hesitate to telephone the undersigned.
Thank you for your assistance.

Enc.
CKN/SFC/md

Very truly yours,

Cynthia K. Nicholson
Cynthia K. Nicholson