

08-04-2000



101422735



7-28-00

### 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
- Change of Name
- Other

Effective Date  
Month Day Year

#### 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

#### 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.)

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:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK  
REEL: 002114 FRAME: 0772

**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="1902888"/> | <input type="text"/> | <input type="text"/> |
| <input type="text" value="1166675"/> | <input type="text"/> | <input type="text"/> |
| <input type="text" value="1903268"/> | <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.

Valerie G. Edward

Name of Person Signing



Signature

July 27 2000

Date Signed



Ministry of Consumer Services and Commercial Relations  
 Ce formulaire est à utiliser par les personnes qui ont des sociétés par actions  
 dont les statuts sont en vigueur le

Ministère de la Consommation et du Commerce  
 Ce formulaire est à utiliser par les personnes dont les statuts sont en vigueur le

Ontario Corporation Number  
 Numéro de la compagnie en Ontario  
 950182

OCTOBER 26 OCTOBRE, 1994

*S. D. [Signature]*  
 Director / Directeur  
 Business Corporations Act / Loi sur les sociétés par actions

TRANS  
 CODE  
 C  
 18

ARTICLES OF AMENDMENT  
 STATUTS DE MODIFICATION

Form 3  
 Business  
 Corporations  
 Act,  
 1982  
 Formule  
 numéro 3  
 Loi de 1982  
 sur les  
 compagnies

- The present name of the corporation is: *Dénomination sociale actuelle de la compagnie:*  
 NORTHCO FOODS LIMITED
- The name of the corporation is changed to (if applicable): *Nouvelle dénomination sociale de la compagnie (s'il y a lieu):*  
 ROBIN'S FOODS INC.
- Date of incorporation/amalgamation: *Date de la constitution ou de la fusion:*  
 1, SEPTEMBER, 1991  
(Day, Month, Year)  
 (jour, mois, année)

4. The articles of the corporation are amended as follows: *Les statuts de la compagnie sont modifiés de la façon suivante:*

Resolved that the name of the Corporation is changed to  
 ROBIN'S FOODS INC.

5. The amendment has been duly authorized as required by Sections 167 and 169 (as applicable) of the Business Corporations Act.

*La modification a été dûment autorisée conformément à l'article 167 et, s'il y a lieu, à l'article 169 de la Loi sur les compagnies.*

6. The resolution authorizing the amendment was approved by the shareholders/directors (as applicable) of the corporation on

*Les actionnaires ou les administrateurs (le cas échéant) de la compagnie ont approuvé la résolution autorisant la modification*

21, OCTOBER, 1994

(Day, Month, Year)  
(jour, mois, année)

These articles are signed in duplicate.

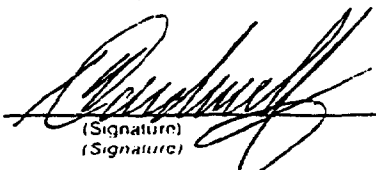
*Les présents statuts sont signés en double exemplaire.*

**NORTHCO FOODS LIMITED**

(Name of Corporation)  
(Denomination sociale de la compagnie)

By/Par:

(Signature)  
(Signature)



**PRESIDENT**

(Description of Office)  
(Fonction)



**TRADEMARK**

**REEL: 002114 FRAME: 0775**

950182

OCTOBER 26 OCTOBRE, 1994

*Sam D. Linn*

Director / Directeur  
Business Corporations Act / Loi sur les sociétés par actions

TRANS  
CODE

C  
18

ARTICLES OF AMENDMENT  
STATUTS DE MODIFICATION

Form 3  
Business  
Corporations  
Act,  
1982  
Formule  
numéro 3  
Loi de 1982  
sur les  
compagnies

- The present name of the corporation is: *Dénomination sociale actuelle de la compagnie:*  
N O R T H C O F O O D S L I M I T E D
- The name of the corporation is changed to (if applicable): *Nouvelle dénomination sociale de la compagnie (s'il y a lieu):*  
R O B I N ' S F O O D S I N C .
- Date of incorporation/amalgamation: *Date de la constitution ou de la fusion:*  
1, SEPTEMBER, 1991  
(Day, Month, Year)  
(jour, mois, année)
- The articles of the corporation are amended as follows: *Les statuts de la compagnie sont modifiés de la façon suivante:*

Resolved that the name of the Corporation is changed to  
ROBIN'S FOODS INC.

5. The amendment has been duly authorized as required by Sections 167 and 169 (as applicable) of the Business Corporations Act.

*La modification a été dûment autorisée conformément à l'article 167 et, s'il y a lieu, à l'article 169 de la Loi sur les compagnies.*

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(Denomination sociale de la compagnie)

By/Par:

  
(Signature)  
(Signature)

PRESIDENT

(Description of Office)  
(fonction)