

09-13-2000

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



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

101455854

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

8.11.00

TO: The Commissioner of Patents and Trademarks: Please record the attached original documents(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

12-18-97

Conveying Party

Mark if additional names of conveying parties attached

Name

Execution Date
Month Day Year

6-22-00

Formerly

75114555

- Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of conveying 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

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.)

Citizenship/State of Incorporation/Organization

FOR OFFICE USE ONLY

1/2000 NTHA11 00000033 75114555

481 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 this 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: 002134 FRAME: 0461

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)

Address (line 1)

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="75/114,555"/>	<input type="text" value="75/003,972"/>	<input type="text"/>	<input type="text" value="2,217,089"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="75/031,484"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="75/634,300"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of Properties

Enter the total number or properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Deposit Account

Enclosed

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

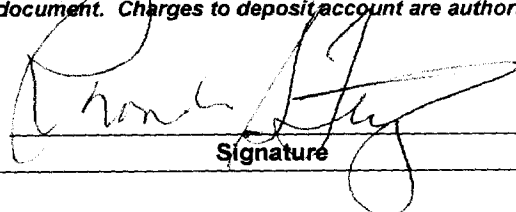
No

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.

Rhonda S. Ferguson

Name of Person Signing



Signature

8-11-00

Date Signed

ASSIGNMENT


WHEREAS, OFFICEMAX, INC., an Ohio corporation with its principal office at 3605 Warrensville Center Road, Shaker Heights, Ohio 44122 ("**Assignor**"), has adopted and used, and is using, in the United States, the trademarks/service marks identified on Schedule A hereto (the "**Marks**") in connection with the operation and promotion of stores that offer for sale to the public a line of goods and services including, without limitation, any or all of the following: office products and supplies; computer hardware, software, peripherals, accessories and supplies; business machines; furniture and related merchandise; and copying and other business services; and

WHEREAS, Assignor is the owner of registrations of certain of the Marks, which registrations are also identified on Schedule A hereto; and

WHEREAS, OMX, INC., a Nevada corporation with its principal office at 300 South Fourth Street, Suite 1100, Las Vegas, Nevada 89101 ("**Assignee**"), wishes to acquire all **Assignor**'s rights in and to the Marks;

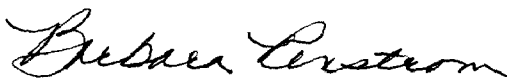
NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, **Assignor** does hereby assign to **Assignee**, effective *December 18, 1997*, all right, title, and interest in and to the Marks and the registrations identified on Schedule A hereto, together with the good will of the business symbolized by the Marks and with the right to recover for all remedies for past infringements of the Marks.

OFFICEMAX, INC.

By: 
Ross H. Pollock, Secretary

STATE OF OHIO)
) SS:
COUNTY OF CUYAHOGA)

On this 22nd day of June 2000, before me personally came Ross H. Pollock, to me known to be Secretary of OfficeMax, Inc., a corporation of the State of Ohio, the Assignor above-named, and acknowledged that he executed the foregoing instrument and he did swear that he executed this Assignment of his free act on behalf of said Assignor and pursuant to authority duly received.


Notary Public



Barbara Renstrom
Notary Public - State of Ohio
Residence - Summit County
My Commission Expires May 22, 2002

SCHEDULE A

REGISTRATIONS

<u>MARK</u>	<u>REGISTRATION NO.</u>	<u>CLASSES</u>
MAXLEASE	2,217,808	35, 38, 42

APPLICATIONS

<u>MARK</u>	<u>APPLICATION NO.</u>	<u>CLASSES</u>
COPYMAX	75/114,555	16
COPYMAX	75/163,3000	35, 38, 42
COPYMAX LINK	75,031,484	35, 38, 42
TRIMAX	75/003,972	35, 38, 42