

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

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

**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  
Effective Date  
Month Day Year  
 Merger  05 10 2001  
 Change of Name  
 Other

**Conveying Party**

Mark if additional names of conveying parties attached

Name  Denise N. Chyette

Effective Date  
Month Day Year  
 05 10 2001

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship/State of Incorporation/Organization  USA

**Receiving Party**

Mark if additional names of conveying parties attached

Name  Wellnext LLC

DBA/AK/A/T/A

Composed of

Address (line 1)  1500 North LaSalle Street

Address (line 2)  Suite 4A

Address (line 3)  Chicago  Illinois  60610  
City State/Country Zip Code

Individual  General Partnership  Limited Partnership

Corporation  Association

Other  Limited Liability Corporation

Citizenship/State of Incorporation/Organization  Illinois

*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.

Mall documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington D.C. 20231

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**TRADEMARK**  
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U.S. Department of Commerce  
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TRADEMARK

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**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="75/937,109"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

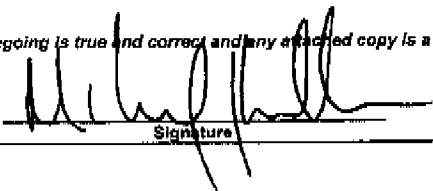
**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to account) Deposit Account Number

Authorization to charge additional fees: Yes  No

**Statement and Signature**  
 To the best of my knowledge and belief, the foregoing 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.



Name of Person Signing Signature Date Signed

**ASSIGNMENT**

**WHEREAS**, Denise N. Chyette, an individual having a principal place of business at 1500 North LaSalle Street, Suite 4A, Chicago, Illinois 60610 (hereinafter "Assignor"), has adopted, used, and is using the registered and pending marks and domain names identified on Exhibit A (collectively "Marks");

**WHEREAS**, WELLNEXT, LLC, an Illinois limited liability corporation, having a principal place of business at 1500 North LaSalle Street, Suite 4A, Chicago, Illinois 60610 (hereinafter "Assignee"), is desirous of acquiring the Marks, together with the goodwill of the business symbolized by the Marks, and the registrations thereof;

**NOW, THEREFORE**, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Assignor does hereby assign, transfer and convey unto Assignee, its successors, assigns and legal representatives effective this 10 day of May 2001, all rights, title, and interest in and to the Marks, together with the goodwill of the business symbolized by the Marks, the registrations or applications thereof, and all right to sue and recover and retain damages for any current, future or past infringement thereupon.

Denise N. Chyette,  
an Individual

By: \_\_\_\_\_



**EXHIBIT A**

Applications in United States:

<i>TRADEMARK</i>	<i>APPLICATION/ REGISTRATION NO.</i>	<i>APPLICATION/ REGISTRATION DATE</i>
WELLNEXT	75/937,109	March 6, 2000

Domain Name:

WELLNEXT.COM