



**Domestic Representative Name and Address**

Enter for the first Receiving Party only

Name Robert W. Becker  
Address (line 1) ROBERT W. BECKER & ASSOCIATES  
Address (line 2) 11896 N. Highway 14  
Address (line 3) Suite B  
Address (line 4) Tijeras, NM 87059

**Correspondent Name and Address**

Area Code and Telephone Number (505) 286-3511

Name Robert W. Becker  
Address (line 1) ROBERT W. BECKER & ASSOCIATES  
Address (line 2) 11896 N. Highway 14  
Address (line 3) Suite B  
Address (line 4) Tijeras, NM 87059

**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)
75/751,394	

**Number of Properties**

Enter the total number of properties involved. # 1

**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: # 02-1653

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 W. Becker  
Name of Person Signing

Robert - Becker  
Signature

04/09/2001  
Date



**Domestic Representative Name and Address**

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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)

75/751,394

**Number of Properties**

Enter the total number of properties involved.

# \_\_\_\_\_

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$ 40.00

Method of Payment:

Enclosed ( )

Deposit Account (X)

**Deposit Account**

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

# 02-1653

Authorization to charge additional fees: Yes (x)

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 W. Becker  
Name of Person Signing

Robert - Becker  
Signature

12/20/2000  
Date

**SUPPORTING DOCUMENTATION FOR TRADEMARK  
CHANGE OF NAME DOCUMENTS IS**

**NO LONGER REQUIRED**

**UNDER THE**

**TRADEMARK LAW TREATY ACT**

**EFFECTIVE**

**OCTOBER 30, 1999**