

05-23-2001



Form PTO-1594
1-31-92

U.S. DEPARTMENT OF COMMERCE
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To the Honorable Commissioner of P

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...nal documents or copy thereof.

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| <p>1. Name of conveying party(ies):</p> <p>Fleet Boston Corporation 100 Federal Street Boston, MA 02110</p> <p><i>MED 5-18-01</i></p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation - Rhode Island <input type="checkbox"/> Other: _____ Additional name(s) of conveying party(ies) attached? Yes X No</p> <p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement X Change of Name <input type="checkbox"/> Other: _____</p> <p>Execution Date: 4/18/00</p> | <p>2. Name and address of receiving party(ies):</p> <p>Name: FleetBoston Financial Corporation</p> <p>Internal Address: _____</p> <p>Street Address: 100 Federal Street City: Boston State: MA Zip: 02110</p> <p><input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <i>Y 7 8</i> <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation - Rhode Island <input type="checkbox"/> Other: _____</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input type="checkbox"/> No (Designations must be a separate document from Assignment) Additional name(s) & address(es) attached? : <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>4. Application number(s) or registration numbers(s):</p> <p>A. Trademark Application No.(s)</p> | <p>B. Trademark Registration No. 2069887</p> |

Additional numbers attached? Yes X No

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| <p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: Deborah L. Benson, Esq.</p> <p>Internal Address: Hinckley, Allen & Snyder, LLP</p> <p>Street Address: 28 State Street</p> <p>City: Boston State: MA Zip: 02109</p> | <p>6. Total number of applications and registrations involved: [1]</p> <p>7. Total fee (37 CFR 3.41) \$40</p> <p>X Enclosed</p> <p><input type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: _____</p> <p>(Attach duplicate copy of this page if paying by deposit account)</p> |
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9. 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.

Deborah L. Benson, Esq.

Deborah
Signature

May 10, 2001
Date

Total number of pages comprising cover sheet [1]

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State

The Office of the Secretary of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

FLEET BOSTON CORPORATION

a Rhode Island corporation, filed original articles of amendment in this office on the eighteenth day of April A.D., 2000 changing the corporate name to FleetBoston Financial Corporation.

SIGNED AND SEALED this nineteenth day of April A.D., 2000.

James R. Langevin

Secretary of State

BY *Relina Anterelli*

