

05-23-2001



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TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type		Conveyance Type	
<input checked="" type="checkbox"/> New		<input type="checkbox"/> Assignment	<input type="checkbox"/> License
<input type="checkbox"/> Resubmission (Non-Recordation) Document ID#		<input type="checkbox"/> Security Agreement	<input type="checkbox"/> Nunc Pro Tunc Assignment Effective Date
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Conveying Party () Mark if additional names of conveying parties attached

Name Forkardt GmbH

Formerly

() Individual () General Partnership () Limited Partnership () Corporation () Association

(x) Other Company with limited Liability

(X) Citizenship/State of Incorporation/Organization Germany

Execution Date
Month Day Year
5/20/1999

Receiving Party () Mark if additional names of receiving parties attached

Name Forkardt Deutschland GmbH

DBA/AKA/TA

Composed of

Address (line 1) Heinrich-Heitz-Strasse 7

Address (line 2)

Address (line 3) Erkrath, Germany
city State/Country

() Individual () General Partnership () Limited Partnership () If document to be recorded is an assignment and the receiving part not domiciled in the United States, appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

() Corporation () Association

(X) Other Company with limited Liability

(x) Citizenship/State of Incorporation/Organization Germany

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on 8 May , 2001.

Gabriele Longoria
Gabriele Longoria, Secretary

Domestic Representative Name and Address Enter for the first Receiving Party only

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

Correspondent Name and Address Area Code and Telephone Number (505) 286-3511 _____

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

793,843

794,423

Number of Properties Enter the total number of properties involved. # 2

Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$ 65.00

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

05/08/2001
Date

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NO LONGER REQUIRED

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OCTOBER 30, 1999