

7-9-01

08-07-2001

Form PTO-1594 (Rev. 03/01) MJD/9/01 F  
OMB No. 0651-0027 (exp. 5/31/2002)



U.S. DEPARTMENT OF COMMERCE  
U.S. Patent and Trademark Office

Tab settings ⇌ ⇌ ⇌ ▼

101801230 ▼ ▼ ▼

To the Honorable Commissioner of Patents and Trademarks. Please return the original documents or copy thereof.

1. Name of conveying party(ies):  
Crystallize, Inc., a Michigan corporation

- Individual(s)
- General Partnership
- Corporation-State
- Other \_\_\_\_\_
- Association
- Limited Partnership

Additional name(s) of conveying party(ies) attached?  Yes  No

2. Name and address of receiving party(ies)  
Name: M-Group, Inc. as collateral agent

Internal Address: \_\_\_\_\_  
Address: \_\_\_\_\_

Street Address: 805 East Maple Road, Suite 333

City: Birmingham State: MI Zip: 48009

- Individual(s) citizenship \_\_\_\_\_
- Association \_\_\_\_\_
- General Partnership \_\_\_\_\_
- Limited Partnership \_\_\_\_\_
- Corporation-State \_\_\_\_\_
- Other \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
(Designations must be a separate document from assignment)  
Additional name(s) & address(es) attached?  Yes  No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other \_\_\_\_\_
- Merger
- Change of Name

Execution Date: June 26, 2001

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

75772400, 75905057, 78003804

Additional number(s) attached  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: David N. Parsigian

Internal Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Street Address: Miller Canfield Paddock & Stone

101 North Main Street, Seventh Floor

City: Ann Arbor State: MI Zip: 48104

6. Total number of applications and registrations involved: 3

7. Total fee (37 CFR 3.41).....\$ 75.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: \_\_\_\_\_

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

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.

Josh Mondry, Vice President

Name of Person Signing

Signature

Date

Total number of pages including cover sheet, attachments, and document:

07/25/2001 DBYRME 00000003 75772400

40.00 OP  
50.00 OP

documents to be recorded with required cover sheet information to:  
Commissioner of Patent & Trademarks, Box Assignments  
Washington, D.C. 20231

01 FC:481  
02 FC:482

TRADEMARK  
REEL: 002302 FRAME: 0650

**UCC FINANCING STATEMENT AMENDMENT**  
**FOLLOW INSTRUCTIONS (front and back) CAREFULLY**

A. Name & Phone of Contact at Filer (optional)  
**David N. Parsigian, Esq.** (734) 668-7117

B. Send Acknowledgement to: (Name and Address)  
**Miller, Canfield, Paddock & Stone, PLC**  
**Seventh Floor**  
**101 North Main Street**  
**Ann Arbor, Michigan 48104-1400**

The Above Space is For Filing Office Use Only

1a. Initial Financing Statement File # **D700689**

1.b. This Financing Statement Amendment is to be filed (for record) (or recorded) in the **REAL ESTATE RECORDS**

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. **ASSIGNMENT:**  FULL or  PARTIAL. Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.  
 Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  
 **CHANGE** name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  **DELETE** name: Give record name to be deleted in item 6a or 6b.  **ADD** name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable)

6. **CURRENT RECORD INFORMATION:**

6a. Organization's Name  
**Crystallize, Inc., f/k/a Data Merger Technologies, Inc., f/k/a Sorcery Software, Inc.**

OR

6b. Individual's Last Name	First Name	Middle Name	Suffix
----------------------------	------------	-------------	--------

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. Organization's Name

OR

7b. Individual's Last Name	First Name	Middle Name	Suffix
----------------------------	------------	-------------	--------

7c. Mailing Address <b>1410 Woodridge</b>	City <b>Ann Arbor</b>	State <b>Michigan</b>	Postal Code <b>48105</b>	Country <b>USA</b>
7d. Tax I.D. #: SSN or EIN <b>38-3404597</b>	Optional Add'l Info Re Organization Debtor	7e. Type of Organization	7f. Jurisdiction of Organization	7g. Organizational I.D. #, if any <input checked="" type="checkbox"/> None

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.  
 Describe collateral  released or  added, or give entire  restated collateral description.

9. **NAME of SECURED PARTY of RECORD** (or if this is an Assignment, name of assignor).

9a. Organization's Name  
**M Group, Inc. as collateral agent**

OR

9b. Individual's Last Name	First Name	Middle Name	Suffix
----------------------------	------------	-------------	--------

10. <b>REQUIRED SIGNATURE(S)</b>  <b>M-Group, Inc.</b> 	11. <b>Optional Filer Reference Data</b>
--	--

FILING OFFICER COPY - NATIONAL UCC AMENDMENT (FORM UCC3) (TRANS) (REV. 11/19/98)