

RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

08-28-2001

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Tab settings



to attached original documents or copy thereof.

To the Honorable Commissioner of I

101825319

and address of receiving party(ies):

1. Name of conveying party(ies):

KR DERMATOLOGICS, INC.

Name: RODAN & FIELDS, LLC

08/10/01

Internal Address:

PMB 442

Street Address: 6114 LASALLE AVENUE

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

City: Oakland State: CA ZIP: 94611

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

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

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: August 1, 2001

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

A. Trademark Application No.(s)

B. Trademark registration No.(s)

2,371,069
2,372,867



08-10-2001

Additional numbers attached? Yes No

U.S. Patent & TMO/TM Mail Rcpt Dt. #34

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

Name: Thomas R. Lampe
BIELEN, LAMPE & THOEMING

Internal Address:

Street Address: 1990 N. California Blvd., Suite 720

City: Walnut Creek State: CA ZIP: 94596

6. Total number of applications and registrations involved: 2

7. Total fee (37 CFR 3.41): \$ 80.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

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

08/27/2001 JJALLAH2 00000020 2371069

01 FC:481 40.00 DP
02 FC:482 25.00 DP

DO NOT USE THIS SPACE
Refund Ref:
08/27/2001 JJALLAH2 0000108871

CHECK Refund Total: \$15.00

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.

Thomas R. Lampe
Name of Person Signing

BIELEN, LAMPE & THOEMING

[Signature]
Signature

August 7, 2001
Date

Total number of pages (including cover sheet):

TRADEMARK
REEL: 002356 FRAME: 0005

ASSIGNMENT OF TRADEMARK REGISTRATIONS

WHEREAS, KR DERMATOLOGICS, INC., a corporation organized under the laws of the State of California, having a business address as PMB 442, 6114 LaSalle Avenue, Oakland, California 94611-2802, has adopted and is using the following marks registered on the Principal Register in the United States Patent and Trademark Office:

<u>Mark</u>	<u>Reg. No.</u>	<u>Reg. Date</u>
RODAN & FIELDS	2,371,069	July 25, 2000
RODAN & FIELDS	2,372,867	August 1, 2000

AND WHEREAS RODAN & FIELDS, LLC., a California corporation, with a place of business at PMB 442, 6114 LaSalle Avenue, Oakland, California 94611-2802, is desirous of acquiring said marks;

NOW THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, said KR DERMATOLOGICS, INC. does hereby assign unto the said RODAN & FIELDS, LLC. all right, title and interest in and to the said marks, together with the good will of the business symbolized by the marks, and the above identified registrations of said marks.

Dated: 8/1/01

[Signature]
KATHRYN P. RODAN, CEO

ALL PURPOSE ACKNOWLEDGEMENT

State of <u>California</u>)	CAPACITY CLAIMED BY SIGNER
County of <u>Alameda</u>)	<input type="checkbox"/> Individual(s)
	<input checked="" type="checkbox"/> Corporate
	Officer(s) <u>CEO</u>
	Title(s)
	<input type="checkbox"/> Partner(s)
	<input type="checkbox"/> Attorney-in-Fact
	<input type="checkbox"/> Trustee(s)
	<input type="checkbox"/> Subscribing Witness
	<input type="checkbox"/> Guardian/Conservator
	<input type="checkbox"/> Other: _____

SIGNER IS REPRESENTING:
 Name of Person(s) or Entity(ies)
KR DERMATOLOGICS, INC

On August 1, 2001 before me, Charles D. Dewitt, Notary Public
 Name, Title of Officer-E.G.,
 "Jane Doe, Notary Public"

Personally appeared Kathryn P. Rodan
 Name of Signer(s)

Personally known to me - **OR** - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

[Signature]
 Signature of Notary

