

FORM PTO-1594

Docket No. 41942/VGG/H320

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

Box Assignment
Commissioner of Patents and Trademarks
Washington, D.C. 20231

Post Office Box 7068
Pasadena, CA 91109-7068

Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof:

<p>1. Name of conveying party(ies): HINES HORTICULTURE, INC.</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 <input type="checkbox"/> Other <input checked="" type="checkbox"/> Exists Under Laws of California</p> <p>Additional name(s) of conveying party(ies) attached: No</p>	<p>2. Name and address of receiving party(ies): Name: HINES NURSERIES, INC. Street Address: 12621 Jeffrey Road, Irvine, California 92626-2199</p> <p><input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Other: <input checked="" type="checkbox"/> Exists Under Laws of California</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: (Designation must be a separate document from Assignment). Additional name(s) & address(es) attached?</p>
<p>3. Name of conveyance:</p> <p><input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other:</p> <p>Execution Date: October 15, 2002</p>	
<p>4. A. Trademark Application No.(s) 76/224,320</p>	<p>4. B. Trademark Registration No.(s)</p> <p>Additional numbers attached? No</p>
<p>5. Please return the recorded document and address all correspondence to: CHRISTIE, PARKER & HALE, LLP P.O. Box 7068 Pasadena, CA 91109-7068 Attention: Vincent G. Gioia</p>	<p>6. Total number of applications or registrations involved..... 1</p> <p>7. <input checked="" type="checkbox"/> Total fee to be charged to Deposit Account No. 03-1728 (37 CFR 3.41): \$ 40.00</p> <p>8. <input checked="" type="checkbox"/> Any deficiency or overpayment of fees should be charged or credited to Deposit Account No. 03-1728, except for payment of issue fees required under 37 CFR § 1.18. Please show our docket number with any credit or charge to our Deposit Account.</p>
<p>10. <input type="checkbox"/> Explanatory letter is enclosed.</p>	
<p>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.</p> <p>Date: October 15, 2002</p> <p>By <u><i>Vincent G. Gioia</i></u> Name: Vincent G. Gioia 626/795-9900</p> <p>Total number of pages including cover sheet, attachments, and document: 2</p>	

TRADEMARK

TRADEMARK ASSIGNMENT

WHEREAS, HINES HORTICULTURE, INC., a California corporation, having a place of business at 12621 Jeffrey Road, Irvine, California 92620-2199 ("ASSIGNOR" herein), has used and is the owner of the following mark,

<u>Mark</u>	<u>Serial No.</u>	<u>Filed</u>	<u>Docket No.</u>
SIGNATURE GARDENS	76/224,320	3/14/01	41942/VGG/H320

WHEREAS, HINES NURSERIES, INC., a California corporation, having a place of business at 12621 Jeffrey Road, Irvine, California 92620-2199 ("ASSIGNEE" herein), desires to acquire said mark and the registration thereof, together with the goodwill of the business in connection with which said mark is used.

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, ASSIGNOR does hereby assign unto said ASSIGNEE all right, title and interest in and to the above mark and the above-identified registration thereof, and all rights and privileges pertaining to said mark, together with the goodwill of the business symbolized by the mark.

ASSIGNOR further agrees that it shall render all reasonable assistance to ASSIGNEE, and will, from time-to-time, execute all instruments and documents necessary to maintain, preserve or protect the mark and its registration, and to perfect the record title of ASSIGNEE in and to said mark and its said registration.

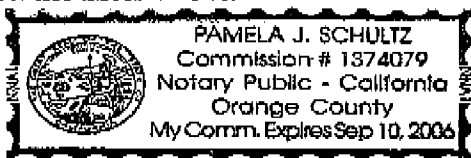
HINES HORTICULTURE, INC.

Date 10/15/2002

By [Signature]
Name: Jeff Meister
Title: Director of Finance

STATE OF)
COUNTY OF)

On October 15, 2002, before me [Signature] Notary Public, personally appeared [Signature] personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.



WITNESS my hand and official seal.

[Signature]
Signature of Notary