

Form PTO-1594  
(Rev. 03/01)  
OMB No. 0651-0027 (exp. 5/31/2002)  
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U.S. DEPARTMENT OF COMMERCE  
U.S. Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks; Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): 10-2-02  
Arthur Andersen & Co.  
 Individual(s)       Association  
 General Partnership       Limited Partnership  
 Corporation-State  
 Other \_\_\_\_\_  
Additional name(s) of conveying party(ies) attached?  Yes  No

2. Name and address of receiving party(ies)  
Name: Arthur Andersen LLP  
Internal  
Address: \_\_\_\_\_  
Street Address: 69 West Washington Street  
City: Chicago State: IL Zip: 60602  
 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       Merger  
 Security Agreement       Change of Name  
 Other \_\_\_\_\_  
Execution Date: 09/01/1994

4. Application number(s) or registration number(s):  
A. Trademark Application No.(s) \_\_\_\_\_  
\_\_\_\_\_

B. Trademark Registration No.(s) 1,430,016  
\_\_\_\_\_

Additional number(s) attached  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:  
Name: Joan L. Long  
Internal Address: Mayer, Brown, Rowe & Maw  
\_\_\_\_\_  
Street Address: 190 S. LaSalle St.  
\_\_\_\_\_  
City: Chicago State: IL Zip: 60603

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.41).....\$ 40.00  
 Enclosed  
 Authorized to be charged to deposit account

8. Deposit account number:  
13-0019

**DO NOT USE THIS SPACE**

9. Signature.  
Joan L. Long  
Name of Person Signing

Signature

10/1/2002  
Date

Total number of pages including cover sheet, attachments, and document: 5

10/25/2002 DBYRNE 00000282 1430016

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

**AFFIDAVIT**

We, Arthur Andersen LLP, a limited liability partnership organized and existing under the laws of the State of Illinois, U.S.A., having its principal place of business at 69 West Washington Street, Chicago, Illinois 60602, U.S.A., do hereby declare that the said limited liability partnership changed its name and status from Arthur Andersen & Co., an Illinois general partnership, on the 1st day of September 1994 by filing the documents attached as Exhibit A with the Secretary of State of Illinois.

Arthur Andersen LLP

By: Robert I. Pender  
Robert I. Pender  
(type name)

Sworn to and subscribed before me on this ~~1st~~ day of July, 1995.

Georgiann Melchiorre  
Notary Public

SEAL



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Form RLLP - 8.1  
1994

George H. Ryan  
Secretary of State  
Business Services  
Uniform Partnership  
m. 357, Howlett Bldg.  
Springfield, IL. 62756

Illinois  
UNIFORM PARTNERSHIP ACT  
APPLICATION for REGISTRATION of  
LIMITED LIABILITY PARTNERSHIP

This space for use  
by Secretary of  
State

~~EXHIBIT A~~

Must be typewritten  
This space for use by Secretary of State

Date: 9-1-94  
Assigned File #: 000-004  
Filing Fee \$ 5000.00  
Approved: [Signature]

**FILED**  
SEP - 1 1994  
SECRETARY OF STATE

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois P.A.'s check or money order, payable to the "Secretary of State".

Federal employer identification number (F.E.I.N.): 36-0732690

SEP - 1 1994

This registration application is effective for one year after the date filed with Secretary of State, and will expire if not renewed prior to that date.

The Registered Limited Liability Partnership name is Arthur Andersen LLP

(The name of the registered limited liability partnership shall contain the words "Registered Limited Liability Partnership" or the abbreviation "L.L.P." or the designation "LLP" as the last words or letters of its name.)

The address, including county, of its principal office: (Post office box alone and c/o are unacceptable) 69 West Washington Street  
Chicago, Illinois 60602

Illinois Registered Agent: James R. Kackley  
Illinois Registered Office: 33 West Monroe Street  
(P.O. Box alone and c/o are unacceptable) Chicago, Illinois 60603

Total number of partners 1.163  
Fee per partner x \$100.00  
Total filing fee \$5,000  
(In no event shall the fee exceed \$5,000.00.)

A brief statement of the business in which the partnership engages:

Include the business code # (IRS Form 1065)

(Code: 8722)

Arthur Andersen LLP provides accounting, tax, auditing, consulting, corporate finance and other related services.

\* The number of partners is 1,163. This includes individuals who are designated as "partners" and individuals who are designated as "participating principals" or "national directors" of the partnership (because of their special contractual relations with the partnership), and has been used solely for purposes of this application and qualifying as a registered limited liability partnership. The fee being paid in connection with the filing of this application has been calculated

LLP - 8.1

- 1. The partnership hereby applies for status as a registered limited liability partnership.
- 2. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this registration application is to the best of my knowledge and belief, true, correct and complete.

Dated September 1 19 94

Signature and Name	Business Address
1. By: <u><i>R. Richard Brown</i></u> Signature	1. <u>69 West Washington Street</u> Number Street
<u>R. Richard Brown, Partner</u> (Type or print name and title)	<u>Chicago, IL 60602</u> City/Town
<u>(Name if corporation or other entity)</u>	<u>Illinois</u> <u>60602</u> State Zip Code
2. _____ Signature	2. _____ Number Street
_____ (Type or print name and title)	_____ City/Town
<u>(Name if corporation or other entity)</u>	<u>State</u> <u>Zip Code</u>

The Registration Application shall be executed by a majority in interest of the partners or by one or more partners authorized to execute the application.

STATE OF ILLINOIS  
Office of the Secretary of State  
I hereby certify that this is a true and  
correct copy, consisting of two  
pages, as taken from the original on file in  
this office.

*George H. Ryan*

GEORGE H. RYAN  
SECRETARY OF STATE

DATED: June 12, 1995

BY: Jennifer L. Borders

