

12-31-2002



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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

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

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID#
- Correction of PTO Error
Reel # Frame #
- Corrective Document
Reel # Frame #

12-26-02

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
- Merger Effective Date
Month Day Year November 22, 2002
- Change of Name
- Other:

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year
November 22, 2002

Name Vision Service Plan Insurance Company

Formerly

- Individual General Partnership Limited Partnership Corporation Association
- Other
- Citizenship/State of Incorporation/Organization Connecticut

Receiving Party

Mark if additional names of receiving parties attached

Name Eyefinity, Inc.

DBA/AKA/TA

Composed of

Address (line 1) 35 Iron Point Circle

Address (line 2) Suite 300

Address (line 3) Folsom, CA 95630

City State/County Zip

- Individual General Partnership Limited Partnership
- Corporation Association
- Other
- Citizenship/State of Incorporation/Organization Delaware

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

FOR OFFICE USE ONLY

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Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

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Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name
Address (line 1)
Address (line 2)
Address (line 3)
Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number (206) 623-7580

Name Heather K. Fox
Address (line 1) Preston Gates & Ellis LLP
Address (line 2) 701 Fifth Avenue
Address (line 3) Suite 5000
Address (line 4) Seattle, WA 98104

Pages

Enter the total number of pages of the attached conveyance document including any attachments.
3

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)

2,559,899

Number of Properties

Enter the total number of properties involved # 1

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41): \$40.00

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: # 162456

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.

Heather K. Fox

Signature

Date Signed

Name of Person Signing

**ASSIGNMENT OF TRADEMARK
AND FEDERAL REGISTRATION**

WHEREAS, Vision Service Plan Insurance Company, a Connecticut corporation ("Assignor"), has adopted and used and is using the mark "EYEFINITY" for which Assignor has obtained a registration in the United States Patent and Trademark Office, Registration No. 2,559,899 issued April 9, 2002; and

WHEREAS, Eyefinity, Inc., a Delaware corporation ("Assignee") is desirous of acquiring said mark and the registration thereof;

NOW, THEREFORE, pursuant to 15 U.S.C. 1060 for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Assignor does hereby assign to Assignee all right, title and interest in and to the said mark, together with the goodwill of the business symbolized by the mark, and the above identified registration thereof.

DATED this 22nd day of November, 2002.

VISION SERVICE PLAN INSURANCE COMPANY

By Don Yee
Don Yee, Senior Vice President

STATE OF CALIFORNIA)
: SS.
COUNTY OF Sacramento

I certify that I know or have satisfactory evidence that Don Yee is the person who appeared before me, and said person acknowledged that he signed this instrument, on oath stated that he was authorized to execute the instrument, and acknowledged it as the Senior Vice President of Vision Service Plan Insurance Company to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated this 22nd day of November, 2002.

Kristy Tyler
Notary Public

My Appointment Expires: 3/14/03

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RECORDED: 12/26/2002

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