/ER SHEET INLY

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

## Tc The Honorable Commiss copy thereof.

102332744

record the attached original documents or

10200	
1. Name of conveying party(ies):	Name and address of receiving party(ies):
Name: KRAFT FOODS, INC.	Name: KRAFT FOODS NORTH AMERICA, INC.
Address: THREE LAKES DRIVE	Address: THREE LAKES DRIVE
City: NORTHFIELD State: IL Zip: 60093	City: NORTHFIELD State: IL Zip: 60093
Individual(s) Association	Individual(s) Association General Partnership Limited Partners xx Corporation-State of: DELAWARE
General Partnership Limited Partnership xx Corporation-State of: DELAWARE	
Other: 17 - 2 - 02	xx Corporation-State of: <u>DELAWARE</u> Other:
11-2-0-	
Additional name(s) of convoying party/ice) ottoched?	If assignee is not domiciled in the United States, a domestic
Additional name(s) of conveying party(ies) attached? Yes <u>xx</u> No	representative designation is attached: Yes <u>xx</u> No
	(Decignations must be a conserted asset of the second
3. Nature of Conveyance:	(Designations must be a separate document from Assignment Additional names(s) & address(es) attached?  Yes xx No
Assignment Merger	
Security Agreement <u>xx</u> Change of Name Other	
Other	
Execution Date:	
Application number(s) or registration number(s):	
A. Trademark Application No.(s)	B. Trademark Registration No.(s)
75/496017 SNACKABLES	
75/496017 SNACKABLES	
75/496017 SNACKABLES	
	mbers on a separate sheet and send along with this page)
Additional numbers attached? Yes (If yes, then attach numbers of party to whom correspondence	
Additional numbers attached? Yes (If yes, then attach num	
Additional numbers attached? Yes (If yes, then attach numbers attached?  5. Name and address of party to whom correspondence concerning document should be mailed:	
Additional numbers attached? Yes (If yes, then attach numbers of party to whom correspondence	6. Total number of applications and registrations invoiced: one
Additional numbers attached? Yes (If yes, then attach numbers attached?  5. Name and address of party to whom correspondence concerning document should be mailed:	Total number of applications and registrations invoiced: one     Total fee (37 CFR 3.41): \$ 40.00     \$40 for one mark; \$25 each additional
Additional numbers attached? Yes (If yes, then attach num  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD	Total number of applications and registrations invoiced: one     Total fee (37 CFR 3.41): \$ 40.00     \$40 for one mark; \$25 each additional  Enclosed
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS	Total number of applications and registrations invoiced: one     Total fee (37 CFR 3.41): \$ 40.00     \$40 for one mark; \$25 each additional  Enclosed
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE	Total number of applications and registrations invoiced: one  7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-168
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16 if any additional fees are required.  8. Deposit account number: 11-1650
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16: if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16 if any additional fees are required.  8. Deposit account number: 11-1650
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16 if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093  Statement and signature.	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16 if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit account)
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093  Statement and signature.  To the best of my knowledge and belief, the foregoing.	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16 if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit account)
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16 if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit account)
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093  O. Statement and signature.  To the best of my knowledge and belief, the foregoing true copy of the original document.	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16: if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit account)
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093  3. Statement and signature.  To the best of my knowledge and belief, the foregoing true copy of the original document.	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-169 if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093  O. Statement and signature.  To the best of my knowledge and belief, the foregoing true copy of the original document.  Name of Person Signing BARTON M. ZEDD	6. Total number of applications and registrations invoiced: one  7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16: if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit account)  account)  and information is true and correct and any attached copy
Additional numbers attached? Yes (If yes, then attach numbers attached? Yes (If yes, then attach numbers)  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: BARTON M. ZEDD  Company: KRAFT FOODS  Street Address: THREE LAKES DRIVE  City: NORTHFIELD State: IL Zip: 60093  O. Statement and signature.  To the best of my knowledge and belief, the foregoing true copy of the original document.	7. Total fee (37 CFR 3.41): \$ 40.00 \$40 for one mark; \$25 each additional  Enclosed  XX Authorized to be charged to deposit account #11-16: if any additional fees are required.  8. Deposit account number: 11-1650 (Attach duplicate copy of this page if paying by deposit account)

01 FC:8521

40.00 CH

**TRADEMARK REEL: 002645 FRAME: 0012** 

## CERTIFICATE of AMENDMENT CERTIFICATE of INCORPORATION of KRAFT FOODS, INC.

FIRST: That by Unanimous Written Consent of the Board of Directors of Kraft Foods, Inc., a corporation organized under the General Corporation Law of the State of Delaware (the "Corporation"), resolutions were duly adopted setting forth a proposed amendment of the Certificate of Incorporation of the Corporation, declaring said amendment to be in the best interests of the Corporation and submitting the amendment for a vote of the sole stockholder of the Corporation for consideration thereof. The resolution setting forth the proposed amendment is as follows:

RESOLVED, that the Certificate of Incorporation of this Corporation be amended by changing Article First thereof so that, as amended, said Article shall be and read as follows: "The name of the Corporation is Kraft Foods North America, Inc."

SECOND: That thereafter the sole stockholder of the Corporation executed a Written Consent of Stockholder, in accordance with Section 228 of the General Corporation Law of the State of Delaware, in which consent the sole stockholder approved said amendment to the Corporation's Certificate of Incorporation.

THIRD: That said amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

FOURTH: That the capital of the Corporation shall not be reduced under or by reason of said amendment.

IN WITNESS WHEREOF, Kraft Foods, Inc. has caused this certificate to be signed by Calvin J. Collier, an Authorized Officer, this 12th day of March, 2001.

KRAFT FOODS, INC.

Name: Calvin J. Collier

Title: Senior Vice President and General Counsel/Corporate Affairs

STATE OF DELAWARE SECRETARY OF STATE DIVISION OF CORPORATIONS FILED 12:00 PM 03/12/2001 010120688 - 0894018

## State of Delaware

## Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "KRAFT FOODS, INC.", CHANGING ITS NAME FROM "KRAFT FOODS, INC." TO "KRAFT FOODS NORTH AMERICA, INC.", FILED IN THIS OFFICE ON THE TWELFTH DAY OF MARCH, A.D. 2001, AT 12 O'CLOCK P.M.



Warriet Smith Windson, Secretary of State

0894018 8100

**RECORDED: 12/02/2002** 

010126028

AUTHENTICATION: 1021615

DATE: 03-14-01

TRADEMARK REEL: 002645 FRAME: 0014