


Form PTO-1594 (Rev. 03/01) 4-18-03 REC CMB No. 0651-0027 (exp. 5/31/2002) Tab settings		04-23-2003  102427795		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks, Washington, D.C. 20231					
1. Name of conveying party(ies): Shoe Inn, Inc. <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State Washington <input type="checkbox"/> Other _____ Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			2. Name and address of receiving party(ies) Name: Shoe Pavilion Corporation Internal Address: 13405 S.E. 30th Street Address: _____ City: Bellevue State: WA Zip: 98005 <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-State Washington <input type="checkbox"/> Other _____ <small>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment)</small> Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: March 4, 1998			4. Application number(s) or registration number(s): A. Trademark Application No.(s) B. Trademark Registration No.(s) 2,130,383 1,670,905 Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Josh S. Ridout, Esq. Internal Address: _____ Paul, Hastings, Janofsky & Walker LLP Street Address: 515 South Flower Street 25th Floor City: Los Angeles State: CA Zip: 90071-2228 (Attach duplicate copy of this page if paying by deposit account)			6. Total number of applications and registrations involved: 2 7. Total fee (37 CFR 3.41).....\$ 65.00 <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: 16-0752		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>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.</i> John D. Hellmann Name of Person Signing John D. Hellmann Signature 4/17/03 Date Total number of pages including cover sheet, attachments, and documents: 2					

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02 FC:8:22

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

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Shoe Pavilion

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STATE of WASHINGTON



SECRETARY of STATE

I, **RALPH MUNRO**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF AMENDMENT

to

SHOE INN, INC.

a Washington Profit corporation. Articles of Amendment were filed for record in this office on the date indicated below.

Changing name to SHOE PAVILION CORPORATION

UBI Number: 600 494 496

Date: March 04, 1998



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Ralph Munro
RALPH MUNRO
Ralph Munro, Secretary of State
2-333697-7