

FORM PTO-1594 (modified) U.S. DEPARTMENT OF COMMERCE
(Rev 03/01) U.S. Patent and Trademark Office
RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

To the Director of the United States Patent and Trademark Office: Please record the attached original documents or copies thereof.

1. Name of conveying party(ies):
Foley & Lardner

Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State
 Other **REORGANIZATION**

Additional conveying party(ies) **NO**

2. Name and address of receiving party(ies):

Name: **Foley & Lardner LLP**
Internal Address: **USBank Center**
Street Address: **777 E. Wisconsin Avenue**
City: State: Zip: **Milwaukee, WI 53202**

Individual(s) citizenship
 Association
 General Partnership
 Limited Partnership
 Corporation-State
 Other **Limited Liability Partnership**

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: **03/01/04**

4. Application number(s) or patent number(s):

A. Trademark Application No.(s)
See Attached Schedule

B. Trademark Registration No.(s)
See Attached Schedule

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **Richard J. McKenna**
Internal Address: **FOLEY & LARDNER LLP**
Street Address: **777 East Wisconsin Avenue**
City: **Milwaukee** State: **Wisconsin** Zip: **53202-5306**

6. Total number of applications and registrations involved: **17**

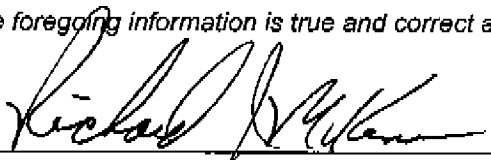
7. Total fee (37 C.F.R. § 3.41): **\$440.00**

Enclosed
 Authorized to be charged to deposit account

8. Deposit account number:
06-1447

DO NOT USE THIS SPACE

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.

Richard J. McKenna  **April 13, 2004**

Name of person signing Signature Date

Total number of pages including cover sheet, attachments, and document: 6

CH \$440.00 061447 78346411

SCHEDULE

<u>MARK</u>	<u>SERIAL NO.</u>	<u>REG. NO.</u>	<u>REF. NO.</u>
:FOLEY FOLEY & LARDNER & Design	78/346,411		999200/431
:FOLEY FOLEY & LARDNER LLP & Design	78/346,244		999200/432
CLIENTS FIRST		2,159,137	999450/176
FOLEY	76/529,537		999200/401
FOLEY & Design	76/530,632		999200/402
FOLEY LARDNER & Design		2,707,009	999200/347
FOLEY: FOLEY & LARDNER & Design	78/346,407		999200/429
FOLEY: FOLEY & LARDNER LLP & Design	78/346,242		999200/430
GLOBALEX		1,691,888	999200/344
INTX		2,483,385	999450/287
KNOWING YOUR INDUSTRY, UNDERSTANDING YOUR BUSINESS		2,624,567	999200/304
KNOWLEDGEGATE	78/300,877		999450/359
LAW WATCH		2,403,062	999450/326
MISCELLANEOUS DESIGN (OF A COLON)		2,711,275	999200/350
MISCELLANEOUS DESIGN (STACKED BLOCKS)		2,819,395	999200/393
NATIONLINK		1,907,762	999200/946
PLAN ING-GLISH DI- SKLO-ZHER (STYLIZED)		2,742,506	999200/223

DFI/CORP/38
RECORD 2/00

United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that the annexed copy has been compared by me with the record on file in the Corporation Section of the Division of Corporate & Consumer Services of this department and that the same is a true copy thereof and the whole of such record; and that I am the legal custodian of said record, and that this certification is in due form.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department.

RAY ALLEN, Deputy Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

DATE: FEB 24 2004

BY:

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

RECEIVED

State of Wisconsin

Sec. 178.40

DEPARTMENT OF FINANCIAL INSTITUTIONS

Wis. Stats.

FEB 20 2004

Division of Corporate & Consumer Services



ok
clerk

**WISCONSIN DOMESTIC OR FOREIGN
LIMITED LIABILITY PARTNERSHIP REGISTRATION STATEMENT**

1. Name of the partnership (see instructions)
Foley & Lardner LLP

Contingent statement The partnership's name does not satisfy sec. 178.42 of the Wisconsin Statutes, and the partnership proposes to register under the following fictitious name:

2. Mailing address of its principal office <u>777 E. Wisconsin Ave., Ste. 3800</u> <u>Milwaukee, Wisconsin 53202-5306</u>	3. This document was drafted by <u>Kenneth J. Rickert</u> (Name the individual who drafted the document)
4. Name of registered agent <u>F & L Corp.</u>	5. Street address of registered office in Wisconsin <u>777 E. Wisconsin Ave., Ste. 3800</u> <u>Milwaukee, Wisconsin 53202-5306</u>

6. Select and mark (X) the appropriate choice below:

The partnership is formed under the laws of Wisconsin

OR

The partnership is a foreign limited liability partnership, formed and registered under the laws of the state of _____

7. Has the foreign limited liability partnership transacted business in Wisconsin after December 10, 1995 without filing a registration statement with the Department of Financial Institutions to obtain authority to transact business in this state? No Yes
 If yes, state the period _____ and refer to item 9 for penalty fee.
 (Period)

8. Additional information (Optional -- May be scheduled)

This Domestic Limited Liability Partnership Registration Statement shall be effective at 12:01 A.M. Central Time on March 1, 2004.

F035553

FILING FEE - \$100.00, or more. See instructions, suggestions, and procedures on following pages.
 DFV/CORP/602(R2/03) Use of this form is mandatory. (Earlier editions, 1996 or later, may be used) 1 of 3

9. Remit the appropriate **FILING FEE**, payable to Department of Financial Institutions

DOMESTIC limited liability partnership	FOREIGN limited liability partnership	
\$ 100.00	Base fee	\$ 100.00
	Penalty (if applicable) for transacting business without holding a certificate of registration	<u>50.00</u>
	Total	\$

10. The partnership submits this statement for the purpose of registering as a "registered limited liability partnership" or a "foreign limited liability partnership" under sec. 178.40, Wis. Stats.

11. Stanley S. Jaspan, Managing Partner (Partner's signature) _____ (Partner's signature)
 02/20/2004 (Date executed) Stanley S. Jaspan (Typed or printed name) _____ (Typed or printed name)

(See instructions for authorized signatures)

INSTRUCTIONS (Ref. sec. 178.40, Wis. Stats. for document content)

Submit one original and one exact copy to Department of Financial Institutions, P O Box 7846, Madison WI, 53707-7846, together with the appropriate **FILING FEE**, payable to the department. Filing fee is non-refundable. (If sent by Express or Priority U.S. mail, address to 345 W. Washington Ave., 3rd Floor, Madison WI, 53703). This document can be made available in alternate formats upon request to qualifying individuals with disabilities. The original must include an original manual signature. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 608-266-8818 for TTY.

For a DOMESTIC limited liability partnership, complete items 1 thru 6, and 9. For a FOREIGN limited liability partnership, complete items 1 thru 7, and 9.

1. The name of a domestic limited liability partnership, or any fictitious name it may adopt, must contain the words "registered limited liability partnership," "limited liability partnership" or the abbreviation "L.L.P." or "LLP" as the last words or letters of its name. The name of a foreign limited liability partnership company shall contain the required words or abbreviations previously mentioned or other words or abbreviations as may be required or authorized by the state in which it is organized.

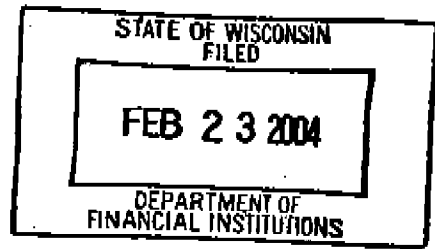
Contingent Statement is to be completed only if it is known or anticipated that the partnership's name is not available for use in Wisconsin. The partnership may not register under a fictitious name unless its actual name is not available for use because it is indistinguishable from other entities on record with the Corporate & Consumer Services Division of the Department of Financial Institutions.

DOMESTIC OR FOREIGN LIMITED LIABILITY PARTNERSHIP REGISTRATION STATEMENT

Chapter 178
Kenneth J. Rickert
Foley & Lardner LLP
777 East Wisconsin Avenue
Milwaukee, Wisconsin 53202-5306
EFFECTIVE DATE: *March 1, 2004*

*2/24/04
804262
\$125.00*

\$100.00 + 25.00 EXP



Your return address and phone number during the day: (414) 297-5685

INSTRUCTIONS (Cont'd)

2. Provide the mailing address of the limited liability partnership's principal office.
3. If the document is executed in Wisconsin, sec. 182.01(3) provides that it shall not be filed unless the name of the person (individual) who drafted it is printed, typewritten or stamped thereon in a legible manner. If the document is not executed in Wisconsin, enter that remark.
- 4 & 5. The limited liability partnership must continuously maintain a registered agent and registered office within Wisconsin. It cannot name itself as its own registered agent. The address of the registered office must be a physical location. State the street number and name, city and ZIP code in Wisconsin.
6. Indicate if the limited liability partnership is formed under the laws of Wisconsin, or if not, the state under whose laws it is formed.
7. If the applicant is a foreign limited liability partnership, indicate whether or not the partnership has transacted business in Wisconsin without holding a certificate of registration. If "yes," indicate the period.
8. This item is provided for the insertion of any additional information the partnership may elect to include.
9. Determine the FILING FEE and remit the appropriate amount, payable to "Department of Financial Institutions."
10. This statement is required by sec. 178.40(1)(e).
11. The document is to be executed by one or more partners authorized by the partnership, or as otherwise provided in the partnership agreement.