

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
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NATURE OF CONVEYANCE:	Termination of Security Interest
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CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Advanced Interactive Systems, Inc.		06/23/2003	CORPORATION: DELAWARE

RECEIVING PARTY DATA	
Name:	Zombie, Inc.
Street Address:	420 4th Avenue
City:	Seattle
State/Country:	WASHINGTON
Postal Code:	98104-2308
Entity Type:	CORPORATION: DELAWARE

PROPERTY NUMBERS Total: 1		
Property Type	Number	Word Mark
Registration Number:	1978883	ZOMBIE

CORRESPONDENCE DATA	
Fax Number:	(972)578-8400
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	972 578 8100
Email:	lbennack@bennacklaw.com
Correspondent Name:	Donald Lloyd Bennack
Address Line 1:	913 East 18th Street
Address Line 2:	Suite 100
Address Line 4:	Plano, TEXAS 75074

NAME OF SUBMITTER:	Donald Lloyd Bennack
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Total Attachments: 2 source=Dela Straight#page1.tif source=Wash Straight#page1.tif
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OP \$40.00 1978883

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE
 U. C. C. FILING SECTION
 FILED 05:29 PM 06/23/2003
 INITIAL FILING NUM: 1011286 7
 AMENDMENT NUMBER: 3158874 1
 SRV: 030413715

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

Davis Wright Tremaine LLP
 Attn: J. Hansell
 1740 Broadway
 New York, New York 10019-4315

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #
 1011286-7 (Filed: 02/07/2001)

1b. THIS FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. **ASSIGNMENT (full or partial):** Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) item 7a or 7b and/or new address (if address change) in item 7c. **DELETE name:** Give record name to be deleted in item 6a or 6b. **ADD name:** Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d. TAX ID #: SSN OR EIN	ADDL INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any
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NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.
 Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME
 Advanced Interactive Systems, Inc.

OR

9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA**
 Delaware - SOS (Debtor Name: Zombie, Inc.)

FILED

TO THE CLERK OF THE COURT
PAID 12⁹¹ 4/10
MAY 10 2000

100-1604-0177

6-12-00

FINANCING STATEMENT - FOLLOW INSTRUCTIONS CAREFULLY
This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional)	B. FILING OFFICE ACCT. # (optional)
C. RETURN COPY TO: (Name and Mailing Address)	
LEXIS DOCUMENT SERVICES INC PO BOX 2969 SPRINGFIELD, IL 62708	
D. OPTIONAL DESIGNATION (if applicable)	UNIFORM/LESSEE
CONDUIT/NO CONDUIT	NON-UCC FILING

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME ADVANCED INTERACTIVE SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 565 ANDOVER PARK WEST		CITY TOKONLA	STATE WA	COUNTRY USA	POSTAL CODE 98188
1d. S.S. OR TAX I.D.#	OPTIONAL ADD'L INFO RE ENTITY CREDITOR	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	1g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME (See attached for additional Debtors)					
OR	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	COUNTRY USA	POSTAL CODE
2d. S.S. OR TAX I.D.#	OPTIONAL ADD'L INFO RE ENTITY CREDITOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	2g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE	

3. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - Insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME SILICON VALLEY BANK					
OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 3003 TASMAN DRIVE, MAIL SORT NC-661		CITY SANTA CLARA	STATE CA	COUNTRY USA	POSTAL CODE 95054

4. This FINANCING STATEMENT covers the following type(s) of item(s) of property:
 Debtor hereby grants Secured Party a security interest in all of the following, whether now owned or hereafter acquired, and wherever located, as collateral for the payment and performance of all present and future indebtedness, liabilities, guarantees and obligations of Debtor to Secured Party: All "accounts," "general intangibles," "chattel paper," "documents," "letters of credit," "instruments," "deposit accounts," "inventory," "farm products," "fixtures," "equipment," "investment property," "securities," "financial assets," "securities accounts," and "security entitlements" as such terms are defined in the California Uniform Commercial Code in effect on the date hereof, and all other types of items of property described on Exhibit A hereto (but this Financing Statement shall be fully effective notwithstanding any lack of any Exhibit A). Debtor is not authorized to sell, transfer, or further encumber any of the foregoing collateral, except for the sale of finished inventory in the ordinary course of business.

5. CHECK BOX if applicable	<input type="checkbox"/> The FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or to in accordance with other applicable provisions (additional fee may be required)	7. If filed in Florida (check one) <input type="checkbox"/> Documentary stamp <input type="checkbox"/> Documentary stamp <input type="checkbox"/> Not Applicable
6. REQUIRED SIGNATURE(S)	8. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) for recording in the REAL ESTATE RECORDS (Additional Fee) (optional)	
ADVANCED INTERACTIVE SYSTEMS, INC. <i>Alan McDev</i>	9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) (Additional Fee) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2	