

**RECORDATION
TRADE**

11-14-2003



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nts or copy thereof.

TO THE ASSISTANT COMMISSIONER OF PATENTS AND TRADEMA

1. Name of conveying party(ies): (If multiple assignors, list numerically)

GASKETS-ON-DEMAND, INC.

11/12/03

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation – State California
- Other:

Additional name(s) of conveying party(ies) attached?

Yes No

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

Name: KNOBBE, MARTENS, OLSON & BEAR, LLP
Internal Address: Fourteenth Floor
Street Address: 2040 Main Street
City: Irvine **State:** CA **ZIP:** 92614

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State
- Other:

OFFICE OF RECORDATION SERVICES
 NOV 12 AM 10:25
 FINANCE SECTION

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) and address(es) attached?

Yes No

3. Nature of conveyance:

- Assignment
- Merger
- Security Agreement
- Change of Name
- Other: **Security Interest**

Execution Date: (If multiple assignors, list execution dates in numerical order corresponding to numbers indicated in 1 above) **August 28, 2003**

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

- a. Trademark Application No(s):
76/020,104
- b. Trademark Registration No(s):

Additional numbers attached? Yes No

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

Name: James B. Bear
 KNOBBE, MARTENS, OLSON & BEAR, LLP
 Customer No. 20,995

Internal Address: Fourteenth Floor
Street Address: 2040 Main Street
City: Irvine **State:** CA **ZIP:** 92614
Attorney's Docket No.: GASKETS.UCC1

7. Total fee (37 CFR 1.21(h)): \$40.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: 11-1410

Please charge this account for any additional fees which may be required, or credit any overpayment to this account.

6. Total number of applications and registrations involved: 1

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.

James B. Bear
Name of Person Signing

[Signature]
Signature

11/10/03
Date

Total number of pages including cover sheet, attachments and document: 3

Mail documents to be recorded with required cover sheet information to:

11/13/2003 ECOOPER 00000209 76020104

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Mail Stop Assignment Recordation Services
 Director, U.S. Patent and Trademark Office
 P.O. Box 1450
 Alexandria, VA 22313-1450

0324560568



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
Cristina Diaz 949-721-5263

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Knobbe, Martens, Olson & Bear, LLP
 Attn: Cristina Diaz
 2040 Main Street
 14th Floor
 Irvine, Ca 92614

FILED
 SACRAMENTO, CA
 AUG 28, 2003 AT 1700
 KEVIN SHELLEY
 SECRETARY OF STATE

THE ABOVE

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME
Gaskets-On-Demand, Inc.

OR
 1b. INDIVIDUAL'S LAST NAME

1c. MAILING ADDRESS
1835 Capital Street

CITY
Cofona

STATE
CA

POSTAL CODE
92880

COUNTRY
US

1d. TAX ID #: SSN OR EIN

ADD'L INFO RE ORGANIZATION DEBTOR

1e. TYPE OF ORGANIZATION

1f. JURISDICTION OF ORGANIZATION
CA

1g. ORGANIZATIONAL ID #, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR
 2b. INDIVIDUAL'S LAST NAME

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

2d. TAX ID #: SSN OR EIN

ADD'L INFO RE ORGANIZATION DEBTOR

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME
Knobbe, Martens, Olson & Bear, LLP

OR
 3b. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS
2040 Main Street, 14th Floor

CITY
Irvine

STATE
CA

POSTAL CODE
92614

COUNTRY
CA

4. This FINANCING STATEMENT covers the following collateral:

"All of debtor's intellectual property which is the subject of secured party's representation, on any recoveries from litigation involving such intellectual property and on any other proceeds of such intellectual property, including but not limited to the property described on Attachment A hereto."

See Attached Exhibit "A"

5. ALTERNATIVE DESIGNATION (if applicable):

LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
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6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)

All Debtors	Debtor 1	Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

GASKETS

FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

TRADEMARK

RECORDED: 11/12/2003

REEL: 002864 FRAME: 0118