

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):

Pegasus Partners II, L.P.

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

Citizenship (see guidelines) Delaware

Execution Date(s) 9/23/2004

Additional names of conveying parties attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other Release of security interest
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Jenzabar, Inc.

Internal Address: _____

Street Address: 5 Cambridge Center

City: Cambridge

State: MA

Country: USA Zip: 02142

Association Citizenship _____

General Partnership Citizenship _____

Limited Partnership Citizenship _____

Corporation Citizenship Delaware

Other _____ Citizenship _____

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)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

2557986

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

JENZABAR.COM

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

Name: James D. Nohl, Esq.

Internal Address: Holland & Knight LLP

Street Address: 10 St. James Avenue

City: Boston

State: MA Zip: 02116

Phone Number: 617 854 1443

Fax Number: 617 523 6850

Email Address: jnohl@nklaw.com

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number 502324

Authorized User Name George Tuttle

9. Signature: *George W. Tuttle*
Signature

December 17, 2004

Date

George W. Tuttle

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 2

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

