

Form PTO-1594
(Rev. 10/02)

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office

OMB No. 0651-0027 (exp. 6/30/2005)

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
CONTINENTAL PET TECHNOLOGIES, INC.

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

Additional name(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies)
Name: GRAHAM PACKAGING PET TECHNOLOGIES INC.

Internal Address: _____
Street Address: 2410 Pleasant Valley Road
City: York State: PA Zip: 17402

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

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 Correction of Recordation Name Change
_____ Reel/Frame 002999/0509

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

A. Trademark Application No.(s) _____

Additional number(s) attached Yes No

B. Trademark Registration No.(s) 2,900,558

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

Name: Marcia A. Auberger
Internal Address: Venable LLP
P.O. Box 34385

Street Address: _____

City: Washington State: DC Zip: 20043-9998

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.41).....\$ _____

Enclosed
 Authorized to be charged to deposit account

8. Deposit account number:
22-0261 Atty Ref. No.: 29953-208859

DO NOT USE THIS SPACE

9. Signature.


Marcia A. Auberger _____ 1/3/05 _____
Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments, and document: 4

Mail documents to be recorded with required cover sheet information to:
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Washington, D.C. 20231

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Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) Tab settings		RECORDATION FORM COVER SHEET TRADEMARKS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): CONTINENTAL PET TECHNOLOGIES, 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 <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: <u>GRAHAM PACKAGING PET TECHNOLOGIES, INC.</u> Internal _____ Address: _____ Street Address: <u>2401 Pleasant Valley Road</u> City: <u>York</u> State: <u>PA</u> Zip: <u>17402</u> <input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input checked="" type="checkbox"/> Limited Partnership <u>Delaware</u> <input type="checkbox"/> Corporation-State _____ <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 type="checkbox"/> No (Designations must be a separate document from this record) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</small>		
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: <u>10/2/04</u>					
4. Application number(s) or registration number(s): A. Trademark Application No.(s) _____ Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			B. Trademark Registration No.(s) <u>2,900,558</u>		
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Marcia A. Aubergier</u> Internal Address: <u>Venable LLP</u> <u>P.O. Box 34385</u> Street Address: _____ City: <u>Washington</u> State: <u>DC</u> Zip: <u>20043-9998</u>			6. Total number of applications and registrations involved: 1		
			7. Total fee (37 CFR 3.41): \$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account		
			8. Deposit account number: <u>22-0261 Atty Ref. No.: 29953-208859</u>		
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9. Signature. <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <u>Marcia A. Aubergier</u> Name of Person Signing </div> <div style="width: 30%; text-align: center;">  Signature </div> <div style="width: 30%; text-align: right;"> <u>12/27/04</u> Date </div> </div> <div style="text-align: right; margin-top: 5px;"> 2 </div>					

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