

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

01/05/2005
900017578

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Release of Security Agreement

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Bank of America Commercial Finance Corporation	NationsCredit Commercial Corporation	06/13/2001	CORPORATION:

RECEIVING PARTY DATA

Name:	Pumpkin Ltd.
Doing Business As:	Pumpkin Masters, Inc.
Street Address:	1905 Sherman Street
City:	Denver
State/Country:	COLORADO
Postal Code:	80203
Entity Type:	CORPORATION: COLORADO - DELAWARE

PROPERTY NUMBERS Total: 8

Property Type	Number	Word Mark
Serial Number:	73650902	CARVE-O-LANTERN
Serial Number:	73671891	CARVE-O-LANTERN
Serial Number:	73671896	PUT A NEW FACE ON HALLOWEEN
Serial Number:	74470930	PUMPKIN MASTERS
Serial Number:	74489514	MELON LIGHTS FOR SUMMER NIGHTS!
Serial Number:	75051736	HALLOWEEN HARDWARE
Serial Number:	75058922	DURASAW
Serial Number:	75058923	'POWER' TOOLS FOR PUMPKINS

CORRESPONDENCE DATA

Fax Number: (303)860-9826
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
 Phone: 303-860-8008
 Email: trademark@pumpkinmasters.com

OP \$215.00 73650902

Correspondent Name: Beth Magnuson
Address Line 1: 1905 Sherman Street
Address Line 4: Denver, COLORADO 80203

NAME OF SUBMITTER:	Beth Magnuson
Signature:	/Beth Magnuson/
Date:	01/05/2005

Total Attachments: 10
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JUN 13 2001 16:00 FR NATIONS CREDIT C. CORP 212 503 7024 TO 912033248199

P.02/05

Bank of America



June 13, 2001

Bank of America Commercial Finance
Corporate Finance
335 Madison Avenue, 5th Floor
New York, NY 10017

Mr. Brian D. Fitzgerald
Director
Pumpkin Ltd.
Pumpkin Masters Holdings, Inc.
In care of Capital Partners
One Pickwick Plaza, Suite 310
Greenwich, CT 06830

Dear Brian:

Reference is made to the Credit Agreement dated as of June 27, 1997, (as amended from time to time the "Credit Agreement") among Pumpkin Ltd. (the "Company"), Pumpkin Masters Holdings, Inc., the Lenders listed on the signature pages hereof and Banc of America Commercial Finance Corporation ("BACF"), formerly known as NationsCredit Commercial Corporation, as Agent.

You have requested that BACF provide the amounts necessary to settle the Company's obligations under the Credit Agreement, the Notes issued thereunder, the other Financing Documents (collectively, the "Credit Documents") and the Warrant dated June 27, 1997 (the "Warrant") issued by the Company to BACF. The following amounts (together with any per diem that may later accrue as stated below and exclusive of letter of credit fees, referred to herein collectively as the "Payoff Amount") are due as of 2:00 P.M. (New York City time) on June 13, 2001.

	<u>Working Capital</u>			
	<u>Note</u>	<u>Tranche B Note</u>	<u>Warrant</u>	<u>Total</u>
Principal	\$586,548.31	\$1,750,000.00	\$900,000.00	\$3,236,548.31
Interest	\$814.81	\$6,120.84	-	\$6,935.65
Line Fees ¹	\$2,782.38	-	-	\$2,782.38
Total	<u>\$590,145.50</u>	<u>\$1,756,120.84</u>	<u>\$900,000.00</u>	<u>\$3,246,266.34</u>
Per Diem Interest ²	\$134.30	\$510.07	-	\$644.37
Per Diem Fees ³	\$31.38	-	-	\$31.38
Total Per Diem	<u>\$165.68</u>	<u>\$510.07</u>	-	<u>\$675.75</u>

¹Does not include letter of credit fees, which will be billed on a monthly basis until their expiration.
²Per diem interest only.
³Per diem unused line fees. Does not include letter of credit fees.

A per diem interest and line fees are provided, effective up to 2:00 P.M. June 29, 2001. Funds received after 2:00 P.M. will require payment of the following day's per diem. Please send funds via wire transfer using the following wire instructions:

Bank One Chicago, IL
ABA: 071000013
Acct No: 52-56933
Acct Name: Banc of America Commercial Finance Corporation
Reference: Pumpkin Master

JUN 13 2001 16:00 FR NATIONS CREDIT C. CORP 212 503 7024 TO 912833248199

P.03/06

Pumpkin LTD.
Pumpkin Masters Holdings, Inc.
Page 2

Upon receipt by Lender of (a) a federal funds wire transfer of the Payoff Amount and (b) a reimbursement agreement from LaSalle Business Credit, Inc., in the form attached hereto, with respect to obligations under a certain outstanding letter of credit (the "Letter of Credit") issued by Chase Manhattan Bank, N.A. for the account of the Company totaling \$654,138.71, Lender agrees that you may then take delivery of the Notes and Warrant for cancellation as previously delivered to your counsel and that Lender shall promptly deliver to LaSalle Business Credit, Inc. UCC-3 termination statements executed by Lender releasing its liens and security interests in the Collateral.

In addition, upon such receipt all outstanding indebtedness and other obligations of the Company pursuant to the Credit Documents and the Warrant shall be paid and satisfied in full and all obligations of any party to the Credit Documents and the Warrant, including any liens or security interests created thereunder, shall terminate and be of no further force or effect (except that the Company's obligations with respect to (x) the Letters of Credit under Section 4.08 of the Credit Agreement and (y) indemnities under Section 10.05 of the Credit Agreement shall survive).

Further, Lender agrees, at the Company's expense, to take all reasonable additional steps requested by the Company as may be necessary to release its security interests under the Credit Documents or otherwise to effectuate the terms and intent hereof.

If you are in agreement, please sign where indicated and return a fully executed version of this letter by overnight delivery and by fax (212-503-7024) to the undersigned on or before 5:00 P.M. (New York City time) June 13, 2001.

This agreement may be relied on by LaSalle Business Credit, Inc. as a third party beneficiary hereof.

Sincerely yours,

BANC OF AMERICA COMMERCIAL FINANCE CORPORATION,
as Lender and as Agent

By: 
Name: James F. Graue
Title: Senior Vice President

JUN 13 2001 16:00 FR NATIONS CREDIT C. CORP 212 503 7024 TO 912033248199

P.04/06

Pumpkin LTD.
Pumpkin Masters Holdings, Inc.
Page 3

ACKNOWLEDGED and AGREED as
of the date first written above:

PUMPKIN MASTERS LTD.

By: William F. Schlueter
Name: William F. Schlueter
Title: Vice President

PUMPKIN MASTERS HOLDINGS, INC.

By: William F. Schlueter
Name: William F. Schlueter
Title: President

JAN 12 2005 12:44PM

SHIPMAN & GOODWIN

NO. 3839 P. 5
Secretary of State, Colorado



UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (from end back) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO (Name and Address)

Kainha S. Lee, Paralegal
Shipman & Goodwin, LLP
One Landmark Square
Stamford, CT 06901

THE ABOVE SPACE IS FOR FILER'S OFFICE USE ONLY

1A. INITIAL FINANCING STATEMENT FILE #
19972055232

1B. THIS FINANCING STATEMENT AMENDMENT IS TO BE FILED FOR REASON (OR REASONS) IN THIS FILE'S ESTATE RECORDS

2. EXPIRATION: Effectiveness of the financing statement identified above is terminated with respect to security interests of the Secured Party contracting the Transaction Statement

3. CONTINUATION: Effectiveness of the financing statement identified above with respect to security interests of the Secured Party contracting the Continuation Statement is continued for the additional period provided by law/option law.

4. ASSIGNMENT: FULL PARTIAL Give name of assignor in Item 7a or 7b and address of assignor in Item 7c. Give also the name of assignee in Item 7c.

5. AMENDMENT PARTY INFORMATION: This Amendment affects Debtor Secured Party of record. Check only one of the two box below.

Also check one of the following two boxes and provide appropriate information in Items 6 and 7.

CHANGE name and/or address: Give correct record name in Item 6a or 6b and give new name (if a name change) in Item 7a or 7b and give 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 6a or 6b, and also check for UCC filing jurisdiction in Item 7d.

6. CURRENT RECORD INFORMATION

6a. CREDITORS NAME
Pumpkin Ltd.

OR

6a. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDRES INFORMATION

7a. ORGANIZATION'S NAME

OR

7a. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7b. ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY

7c. TYPE OF ORGANIZATION

7c. TYPE OF ORGANIZATION	7d. JURISDICTION OF ORGANIZATION	7e. ORGANIZATIONAL ID #, if any

8. AMENDMENT (COLLATERAL CHANGE): check only one box

Does/has changed released or added, or otherwise restricts collateral description

9. NAME OF SECURED PARTY OF RECORD (or if not an assignor name of assignor)

9a. ORGANIZATION'S NAME
NationsCredit Commercial Corporation, as Agent

OR

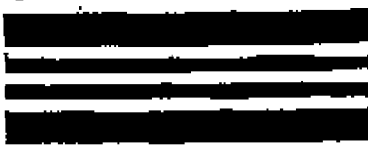
9a. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10. REQUIRED SIGNATURE(S)
NationsCredit Commercial Corporation, as Agent
By: *[Signature]*

11. OPTIONAL FILER REFERENCE DATA

JUN 12 2001 12:44PM SHIPMAN & GOODWIN

NO. 3839 P. 1
Denver County, Colorado



UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (here and back) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Keisha S. Lee, Paralegal
Shipman & Goodwin, LLP
One Landmark Square
Stamford, CT 06901

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1A. INITIAL FINANCING STATEMENT FILE #
5700085212 - Denver County (County Code 01)

1B. THIS FINANCING STATEMENT AMENDMENT IS TO BE FILED (SEE INSTRUCTIONS) (SEE RECORDS) IN THE REAL ESTATE RECORDS.

2. TERMINATION: Effectiveness of the Financing Statement Information added is terminated with respect to security interest(s) of the Secured Party submitting this Termination Statement.

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

4. ASSIGNMENT: FULL 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 8.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects Grant Recipient 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 of either assignor. Give assignor record name in Item 6a or 6b; also give new name (if applicable) in Item 7a or 7b; or new address (if applicable) in Item 7c.

DELETE name. Give record name to be deleted in Item 6a or 6b.

ADD assignor. Complete Item 7a or 7b, and also Item 7c. See Instructions, Items 14-20 of Form UCC-1.

6. CURRENT RECORD INFORMATION

6A. ORGANIZATION'S NAME
Pumpkin Ltd.

OR

6B. INDIVIDUAL'S LAST NAME **FIRST NAME** **MIDDLE NAME** **SUFFIX**

7. CHANGED (NEW OR ADDED) INFORMATION:

7A. ORGANIZATION'S NAME

OR

7B. INDIVIDUAL'S LAST NAME **FIRST NAME** **MIDDLE NAME** **SUFFIX**

7C. MAILING ADDRESS

CITY **STATE** **POSTAL CODE** **COUNTRY**

7E. PARTY'S TYPE OR ORIGIN **ORIGIN FOR INDIVIDUAL ORGANIZATION ORIGIN** **7F. TYPE OF ORGANIZATION** **7G. JURISDICTION OF ORGANIZATION** **7H. ORGANIZATIONAL, IS it, if any** NONE

8. AMENDMENT (COLLATERAL CHANGE): Check any that apply.

Describe collateral: amended added, or give entire remove collateral description.

9. NAME OF SECURED PARTY OF RECORD (if filing in an Assigned name of assignor).

9A. ORGANIZATION'S NAME
NationsCredit Commercial Cooperation, as Agent

OR

9B. INDIVIDUAL'S LAST NAME **FIRST NAME** **MIDDLE NAME** **SUFFIX**

10. REQUIRED SIGNATURE(S)
NationsCredit Commercial Cooperation, as Agent
By: *James H. [Signature]*

11. OPTIONAL FILER REFERENCE DATA

JUN 12 2001 12:44PM SHIPMAN & GOODWIN

NO. 3839 P. 1
Arapahoe County (RAU), Colorado

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (Part one and two) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Keisha S. Lee, Paralegal
Shipman & Goodwin, LLP
One Landmark Square
Stamford, CT 06901

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. INITIAL FINANCING STATEMENT FILE # **A7079487 - Arapahoe County** (County Code 10)

1B. THE FINANCING STATEMENT AMENDMENT IS TO BE FILED FOR REASON(S) IN THE REAL ESTATE RECORDS

2. **TERMINATION:** Assignor(s) of the Financing Statement identified above is/are terminated with respect to security interests of the Secured Party underlying the Termination Statement.

3. **CONTINUATION:** Assignor(s) of the Financing Statement identified above is/are continued with respect to security interests of the Secured Party underlying the Continuation Statement (to be advised for the additional period provided by applicable law).

4. **ASSIGNMENT:** FULL PARTIAL. Give name of assignee in Item 7A or 7B and address of assignee in Item 7C. Also give name of assignor in Item 6.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects Debtor Secured Party of record. Check only one of boxes two below.

Also check one of the following three boxes and provide appropriate information in Items 6 and 7.

CHANGE name and/or address: Give changed name in Item 6A or 6B; also give new name of same person in Item 7A or 7B. **DELETE name:** Give record name to be deleted in Item 6A or 6B. **ADD name:** Complete Item 7A or 7B and give name in Item 7C. Also complete Item 7D if applicable.

6. **CURRENT RECORD INFORMATION:**

6A. ORGANIZATION'S NAME
Pumpkin Ltd.

OR

6B. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7A. ORGANIZATION'S NAME

OR

7B. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7C. MAILING ADDRESS CITY STATE POSTAL CODE OR ZIP/ZIP+4

7D. TAXID# BEN OR GEN OPTORL HOLLIDAY COMMERCE TRADE TYPE OF ORGANIZATION VI. JURISDICTION OF ORGANIZATION VI. ORGANIZATIONAL ID #, if any

8. **AMENDMENT (COLLATERAL CHANGE):** Check only one box.
Debtor's collateral released or added, or give entire revised collateral description.

9. **NAME OF SECURED PARTY OF RECORD (use this in an Assignment name of assignee):**

9A. ORGANIZATION'S NAME
MasonsCredit Commercial Corporation, as Agent

OR

9B. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. **REQUIRED SIGNATURE(S):**
MasonsCredit Commercial Corporation, as Agent
By *James A. James*

11. **OPTIONAL FILER REFERENCE DATA**

JUN 12 2001 12:45PM

SHIPMAN & GOODWIN

Sec. NO. 3839 of P. State, Missouri

[REDACTED]

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO: (NAME AND ADDRESS)

Keisha S. Lwa, Paralegal
Shipman & Goodwin, LLP
One Landmark Square
Stamford, CT 06901

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

16. INITIAL FINANCING STATEMENT FILE # 2806172

19. THIS FINANCING STATEMENT AMENDMENT: IS TO BE FILED (SEE RECORD) (OR RECORDED) IN THE REAL ESTATE RECORDS.

2. TERMINATION: Effectuate of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party set forth in the Termination Statement.

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

4. ASSIGNMENT: FULL 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 6.

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

CHANGE name or other address: Give current record name in Item 6a or 7a; also give new name (if applicable) in Item 7a or 7b and new address of address changes in Item 7c. DELETE PARTY: Give record name to be deleted in Item 6a or 7a. ADD PARTY: Complete Item 6a or 7a, and also Item 7c. Give record name in Item 7a or 7b.

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME
Pumpkin Ltd.

OR

6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE ZIP/CITY COUNTRY

7d. TAX ID #: EIN OR EIN SPECIAL ASSIGNING ORGANIZATION OTHER

7e. TYPE OF ORGANIZATION JURISDICTION OF ORGANIZATION

7f. ORGANIZATIONAL ID #, if any NONE

8. AMENDMENT (COLLATERAL CHANGE): of each only one box. Describe collateral: released or added, or give entire amended collateral description.

9. NAME OF SECURED PARTY OF RECORD (or 2 with 1st Assignment Name of assignee):

9a. ORGANIZATION'S NAME
Nation'sCredit Commercial Corporation, as Agent

OR

9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. REQUIRED SIGNATURE(S)
Nation'sCredit Commercial Corporation, as Agent
By: *James A. [Signature]*

11. OPTIONAL FILER REFERENCE DATA

JAN 12 2005 12:45PM

SHIPMAN & GOODWIN

CS#0.3839ounP. Missouri

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (FORM USE ONLY) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (Optional)	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Kaisha S. Lee, Paralegal Shipman & Goodwin, LLP One Landmark Square Stamford, CT 06901	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. PARTIAL FINANCING STATEMENT FILE # 576 - Clinton County, MI	1b. THIS FINANCING STATEMENT AMENDMENT IS TO BE MADE (FOR RECORD) OR RESPONDED TO IN THE REAL ESTATE RECORDS <input type="checkbox"/>
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2. <input checked="" type="checkbox"/> TERMINATION: (Statement of the Financing Statement identified above is terminated with respect to security interests of the Secured Party pertaining to the Transaction identified.)
3. <input type="checkbox"/> CONTINUATION: (Continuation of the Financing Statement identified above with respect to security interest(s) of the Secured Party following the Continuation Statement is continued by the security parties provided by UCC Article 9.)

4. ASSIGNMENT: FULL 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 8.

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

CHANGE name; another address. Give correct record name in item 6a or 6b; also give a new name if name changed in item 7a or 7b under new Article 9 (Business Structure) in item 7c.

DELETE name: Give record name to be deleted in item 6a or 6b.

ADD name: Complete item 7a or 7b, and give item 7c; also complete item 7d, 7e or 7f, if applicable.

6. CURRENT RECORD INFORMATION:

6a ORGANIZATION'S NAME
Pumpkin Ltd.

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

7a ORGANIZATION'S NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d. TAX ID #: SSN OR EIN	OPTIONAL IDENTIFYING ORGANIZATION IDENT.	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any
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NONE

8. ASSIGNMENT (COLLATERAL CHANGE): Check only one box.
 Describe collateral increased or added, or give entire detailed collateral description.

9. NAME OF SECURED PARTY OF RECORD (or 8 title on Assignment name of assignor):

6a ORGANIZATION'S NAME
NationalCredit Commercial Corporation, as Agent

6b. ORGANIZATION'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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10. SECURED SIGNATURE(S)

NationalCredit Commercial Corporation, as Agent
 By: *James A. Jones*

11. OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY -- NATIONAL UCC AMENDMENT (FORM UCC3) (TRANS) (REV. 1/1/2005) Office of the Secretary of State of Texas Web Form

JUN 12 2001 12:45PM SHIPMAN & GOODWIN

NO. 3839 P. 1
Secretary of State, Illinois

[REDACTED]

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO (Name and Address)

Keisha S. Lee, Paralegal,
Shipman & Goodwin, LLP
One Landmark Square
Stamford, CT 06901

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 003711802

1b. THIS FINANCING STATEMENT AMENDMENT IS AN ASSET (for-asset) OR LIABILITY (for-liability) OF THE REAL ESTATE RECORDS

2. **TERMINATION:** Enforcement of the Financing Statement identified above is terminated with respect to security interests of the Secured Party authorizing this Termination (for-over).

3. **CONTINUATION:** Effectiveness of the Retaining Statement identified above with respect to security interests of the Secured Party authorizing this Continuation Statement (to continue for the additional period provided by applicable law).

4. **ASSIGNMENT** FULL PARTIAL. One name of assignee in item 7a or 7b and address of assignee in item 7c and state given name of assignee in item 8.

5. **AMENDMENT (PARTY INFORMATION):** The Amendment affects Debtor or Secured Party or Record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and 7.

CHANGE NAME AND/OR ADDRESS: Give current record name in item 6a or 6b, state given name and UCC FILE # (if any) in item 7a or 7b under NEW NUMBER OF SECURITY INTERESTS in item 7c. **DELETE NAME:** Give deleted name to be deleted in item 6a or 6b. **ADD NAME:** Complete item 7a or 7b, and #54 (item 7c) and continue items 7a-7c of original(s).

6. CURRENT RECORD INFORMATION

6a. **ORGANIZATION NAME**
Pumpkin Ltd.

OR 6b. **INDIVIDUAL'S LAST NAME** FIRST NAME MIDDLE NAME SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. **ORGANIZATION NAME**

OR 7b. **INDIVIDUAL'S LAST NAME** FIRST NAME MIDDLE NAME SUFFIX

7c. **PHONE NUMBER** CITY STATE POSTAL CODE COUNTRY

7d. **TAX ID #** EIN OR OTHER IDENTIFYING NUMBER **TYPE OF ORGANIZATION** **JURISDICTION OF ORGANIZATION** **ORGANIZATIONAL ID #** by NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box

Deceased collateral released or added, or give new original collateral description.

9. NAME OF SECURED PARTY OF RECORD (or if this is an Assignment name of assignor)

9a. **ORGANIZATION'S NAME**
NationaCredit Commercial Corporation, as Agent

OR 9b. **INDIVIDUAL'S LAST NAME** FIRST NAME MIDDLE NAME SUFFIX

10. REQUIRED SIGNATURE(S)

NationaCredit Commercial Corporation, as Agent

By: *James A. [Signature]*

11. OPTIONAL FILER REFERENCE DATA