

Form PTO-1504 1-31-92 RECORDATION FORM COVER SHEET  
**TRADEMARKS ONLY** Docket No.: SCHT 952  
 To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy hereof.

<p>1. Name of conveying party(ies):        Name: <u>SCHOTT SPEZIALGLAS AG</u>        Address: <u>10 Hattenbergstrasse</u>  <u>D-55122 Mainz, Germany</u>        Individual(s) citizenship: _____        Association _____        General Partnership _____        Limited Partnership _____        Corporation-State _____  <input checked="" type="checkbox"/> Other: <u>a German joint stok company</u></p> <p>Additional name(s) of conveying party(ies) attached _____ Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<p>2. Name and address of receiving party(ies):        Name: <u>SCHOTT AG</u>        Address: <u>10 Hattenbergstrasse</u>  <u>D-55122 Mainz, Germany</u>        Individual(s) citizenship: _____        Association _____        General Partnership _____        Limited Partnership _____        Corporation-State _____  <input checked="" type="checkbox"/> Other: <u>a German joint stock company</u>        If assignee is not domiciled in the United States, a domestic representative designation is attached:  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No        (Designations must be a separate document from Assignment)        Additional name(s) &amp; addresses attached?  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>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>July 1, 2004</u></p>	

<p>A. Trademark Application No.(s)</p>	<p>B. Trademark Registration No.(s)  <u>2,221,401 (ARTISTA)</u></p>
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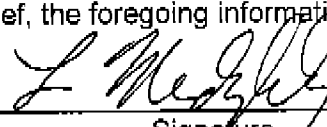
Additional Numbers attached?  Yes  No

<p>5. Name and address of party to whom correspondence concerning document should be mailed:        Name: <u>Leon Medzhibovsky</u>        Internal Address: <u>Fulbright &amp; Jaworski L.L.P.</u>        Street Address: <u>666 Fifth Avenue</u>        City: <u>New York</u> State: <u>NY</u> Zip: <u>10103</u></p>	<p>6. Total number of applications and registration involved: ..... <u>1</u>        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 in the event of insufficiency of check</p>
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	<p>8. Deposit account number:        [NUMBER] <u>50.0624-Order No. 09884350</u>        (Attach duplicate copy of this page if paying by deposit account)</p>
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DO NOT USE THIS SPACE

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.

Leon Medzhibovsky  February 1, 2005  
 Name of Person Signing Signature Date

Total number of pages including cover sheet and attachments 2

OMB No. 0651-0011 (exp. 4/94)

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04-JAN-2005 17:08

SCHOTT GLAS MZ CLM

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
TRADEMARK EXAMINING OFFICE

In re Trademark Registration of:

Schott AG

Reg. No.: 2,221,401

Registration Date: February 2, 1999

Mark: ARTISTA

Commissioner for Trademarks  
P.O. Box 1451  
Alexandria, VA 22313-1451  
Box ASSIGNMENT DIVISION

DESIGNATION OF DOMESTIC REPRESENTATIVE

The following is hereby appointed registrant's representative upon whom notice of process in the proceedings affecting the mark may be served.

Representative's Name:	Leon Medzhibovsky
Address:	Fulbright & Jaworski L.L.P. 666 Fifth Avenue New York, NY 10103
Firm Name:	FULBRIGHT & JAWORSKI L.L.P.
Phone:	(212) 318-3182
Facsimile:	(212) 318-3400

Schott AG

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Date: 4 January, 2005

Name:	Dr. Gordon Weber / Wolfgang R. Wentzel
Title:	Prokurist Prokurist

23485858.1

GESAMT SEITEN 05

RECORDED: 02/01/2005

TRADEMARK  
REEL: 003031 FRAME: 0898  
\*\* TOTAL PAGE 03 \*\*