

FORM PTO-1618A

Expires 06/30/99  
OMB 0651-0027U.S. Department of Commerce  
Patent and Trademark Office  
**TRADEMARK****RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY**

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

**Submission Type**☐ New☐ Resubmission (Non-Recordation)Document ID # ☐ Correction of PTO ErrorReel # Frame # ☒ Corrective DocumentReel #  00313Frame #  0600**Conveyance Type**☐ Assignment☐ License☐ Security Agreement☐ Nunc Pro Tunc Assignment☐ MergerEffective Date  
Month Day Year  
☐ Change of Name☒ Other  RETRACTION OF ASSIGNMENT**Conveying Party**☐ Mark If additional names of conveying parties attachedExecution Date  
Month Day YearName 

HELEN OF TROY TEXAS CORPORATION

01/06/2005

Formerly ☐ Individual☐ General Partnership☐ Limited Partnership☒ Corporation☐ Association☐ Other ☒ Citizenship/State of Incorporation/Organization

TEXAS

**Receiving Party**☐ Mark If additional names of receiving parties attachedName 

HELEN OF TROY LIMITED

DBA/AKA/TA Composed of Address (line 1) 

13 8th AVENUE

Address (line 2) 

P.O. BOX 836E

Address (line 3) 

ST. MICHAEL

BARBADOS

City

State/Country

Zip Code

☐ Individual☐ General Partnership☐ Limited Partnership☒ Corporation☐ Association☐ Other 

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

☒ Citizenship/State of Incorporation/Organization

BARBADOS

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Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20503**TRADEMARK**

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REEL: 003217 FRAME: 0209

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FORM PTO-1618B  
Expires 08/30/99  
OMB 0851-0027

Page 2

U.S. Department of Commerce  
Patent and Trademark Office  
TRADEMARK

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name  Stewart L. Gitler

Address (line 1)  HOFFMAN, WASSON & GITLER, P.C.

Address (line 2)  2461 South Clark Street

Address (line 3)  Suite 522, Crystal Center 2

Address (line 4)  Arlington, Virginia 22202

**Correspondent Name and Address**

Area Code and Telephone Number  (703) 415-0100

Name  Stewart L. Gitler

Address (line 1)  HOFFMAN, WASSON & GITLER, P.C.

Address (line 2)  2461 South Clark Street

Address (line 3)  Suite 522, Crystal Center 2

Address (line 4)  Arlington, Virginia 22202

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#  1

**Trademark Application Number(s) or Registration Number(s)**

☐ Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Registration Number(s)**

<input type="text"/> 2,289,585	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties**

Enter the total number of properties involved.

#  1

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$  40.00

Method of Payment:

Enclosed ☐

Deposit Account ☒

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#  08-2455

Authorization to charge additional fees:

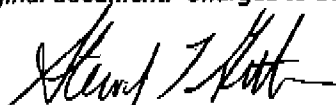
Yes ☒

No ☐

**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. Charges to deposit account are authorized, as indicated herein.

Stewart L. Gitler



10-26-2005

Name of Person Signing

Signature

Date Signed

TRADEMARK

REEL: 003217 FRAME: 0210

U.S Trademark Registration Number 2,289,585  
Registered 10-26-2005  
THERA-NODE THERMAL MASSAGER

**Retraction of Assignment Recorded at Reel 00313  
Frame 0600  
on January 13, 2005**

the document recorded transferring ownership from Helen of troy Texas Corporation to Helen of Troy limited was submitted in error and the recordation should be retracted. The Trademark was not owned by Helen of Troy Texas Corporation at the time of the transfer and therefore the transfer was not valid.

Proper ownership is still in the name of Schering Plough.

Respectfully,



Stewart L. Gitler  
Attorney for Helen of Troy Limited and  
Helen of Troy Texas Corporation

10-26-2005

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