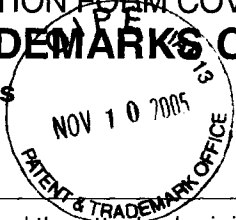


RECORDATION FORM COVER SHEET  
**TRADEMARKS ONLY**

Our Ref.: 4014-28

**Mail Stop Assignment Recordation Services**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



11-16-2005



103120271

To the Commissioner for Trademarks: Please record the attached original.

1. Name of conveying party(ies):  
Intesabci S.p.A.

Individual(s)                       Association  
 General partnership               Limited Partnership  
 Corporation-State: ITALY  
 Other: \_\_\_\_\_

2. Name and address of receiving party:  
Name: Banca Intesa S.p.A.  
Internal Address: \_\_\_\_\_  
Street Address: Piazza Paolo Ferrari No. 10

City: Milan  
State/Country: ITALY

Zip: \_\_\_\_\_

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation-State ITALY  
 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 Assignment               Change of Name  
 Other: \_\_\_\_\_

Execution Date: January 1, 2003

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

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

|                                 |                                  |
|---------------------------------|----------------------------------|
| A. Trademark Application No.(s) | B. Trademark Registration No.(s) |
| (1)                             | (1) 2,730,980                    |
| (2)                             | (2)                              |
| (3)                             | (3)                              |

Additional numbers attached?  Yes  No

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

Name: Frank P. Presta  
Internal Address: \_\_\_\_\_  
Street Address: Nixon & Vanderhye P.C.  
901 North Glebe Road  
11th Floor  
City Arlington State: VA Zip: 22203

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.41)(8521; \$40) (8522; \$25)\$ 40.00  
 Enclosed  
 Authorized to be charged to deposit account #14-1140

8. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.

**DO NOT USE THIS SPACE**

9. Statements 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.

Frank P. Presta                      *Frank P. Presta*                      November 10, 2005  
Name of Person Signing                      Signature                      Date

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

FPP:icb

11/15/2005 ECDOPER 00000219 2730980

01 FC:8021

40.00 DP

SUPPORTING DOCUMENTATION FOR TRADEMARK  
CHANGE OF NAME DOCUMENTS IS

NO LONGER REQUIRED

UNDER THE  
TRADEMARK LAW TREATY ACT  
EFFECTIVE

OCTOBER 30, 1999