



RECORDATION FORM 103176937
TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

2-8-06

1. Name of conveying party(ies):

Time Life, Inc. n/k/a Direct Holdings Americas, Inc.

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

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance /Execution Date(s) :

Execution Date(s) 1/27/2006

- Assignment Merger
- Security Agreement Change of Name
- Other Confirmation of Assignment

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Collectors' Choice Music, Inc.

Internal _____

Address: _____

Street Address: 900 N. Rohlwing Road

City: Itasca

State: IL

Country: U.S.A. Zip: 60143

- Association Citizenship _____
- General Partnership Citizenship _____
- Limited Partnership Citizenship _____
- Corporation Citizenship Illinois
- Other _____ Citizenship _____

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)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s) _____

B. Trademark Registration No.(s)

2,852,364

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):
SERENADE

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

Name: Mark E. Wiemelt, Esq.

Internal Address: _____

Street Address: 10 S. LaSalle St., Ste. 3300

City: Chicago

State: IL Zip: 60603

Phone Number: 312-372-7664

Fax Number: 312-372-6568

Email Address: mark@wiemeltlaw.com

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number 02/09/2006 MUELLER 0000041 2858364

Authorized User Name 81 FC-8521 48.00 DP

9. Signature:

Signature

2/6/2006

Date

Mark E. Wiemelt
Name of Person Signing

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

2

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

