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

1. Name of conveying party(ies):

Bank of America  
(f/k/a Shawmut Bank Connecticut)  
157 Church Street  
New Haven, CT 06510

- Individual(s)  Association
- General Partnership  Limited Partnership
- Corporation- State: \_\_\_\_\_
- Other National Banking Association

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached?  Yes  No

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached?  Yes  No

Name: Laticrete International, Inc.

Internal \_\_\_\_\_

Address: \_\_\_\_\_

Street Address: 1 Laticrete Park North

City: Bethany

State: Connecticut

Country: USA Zip: 06525

Association Citizenship \_\_\_\_\_

General Partnership Citizenship \_\_\_\_\_

Limited Partnership Citizenship \_\_\_\_\_

Corporation Citizenship Connecticut

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)

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

Execution Date(s) 12/22/06

- Assignment  Merger
- Security Agreement  Change of Name
- Other Release of 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)

603474

Additional sheet(s) attached?  Yes  No

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

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

Name: Barbara Sarrantonio, Esq.

Internal Address: Murtha Cullina LLP

Street Address: 185 Asylum St, CityPlace I

City: Hartford

State: CT Zip: 06103

Phone Number: 860-240-6061

Fax Number: 860-240-6150

Email Address: bsarrantonio@murthalaw.com

6. Total number of applications and registrations involved:

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

- 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 081388

Authorized User Name H. Kennedy Hudner

9. Signature: Bank of America

By: Antoinette G. O'Connor  
Signature

12/22/06

Date

Antoinette G. O'Connor, Assistant Vice President

Total number of pages including cover sheet, attachments, and document: 2

BYRNE 000001A 0A1388 603474 of Person Signing

01/04/2007

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Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: 40.00000 Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

