

06-09-2008



Form PTO-1594

(Rev. 10/02)

OMB No. 0651-0027 (exp. 6/30/2005)

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TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE  
U.S. Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

## 1. Name of conveying party(ies):

SPPC Paris Bleu

- ☐ Individual(s)      ☐ Association  
☐ General Partnership      ☐ Limited Partnership  
☐ Corporation-State  
☒ Other French corporation

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

## 3. Nature of conveyance:

- ☐ Assignment      ☐ Merger  
☐ Security Agreement      ☒ Change of Name  
☐ Other \_\_\_\_\_

Execution Date: November 28, 2007

## 2. Name and address of receiving party(ies)

Name: Societe Parisienne deInternal Address: Parfums et CosmetiquesStreet Address: 11, rue MargueritteCity: Paris State: France Zip: 75017

- ☐ Individual(s) citizenship \_\_\_\_\_  
☐ Association \_\_\_\_\_  
☐ General Partnership \_\_\_\_\_  
☐ Limited Partnership \_\_\_\_\_  
☒ Corporation-State French corporation  
☐ 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

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

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

2,878,964

Additional number(s) attached ☐ Yes ☒ No

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

Name: James K. Coons

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

Street Address: 777 High Street, Ste. 200City: Eugene State: OR Zip: 97401

## 6. Total number of applications and registrations involved: \_\_\_\_\_

7. Total fee (37 CFR 3.41).....\$ 40.00

- ☒ Enclosed  
☐ Authorized to be charged to deposit account

## 8. Deposit account number: \_\_\_\_\_

(Attach duplicate copy of this page if paying by deposit account)

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## 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.

James K. Coons

Name of Person Signing

Signature

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2

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

Mail documents to be recorded with required cover sheet in Box 2000, NJAMA1 00000070 2878964  
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TRADEMARK

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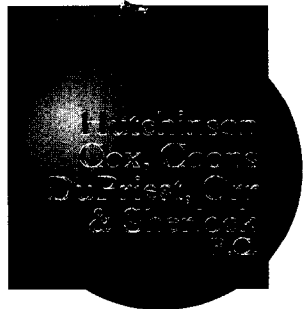
James K. Coons  
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Eugene, OR 97401

as Domestic Representative as attorneys to transact all business in the Patent and  
Trademark Office in connection with the registration referenced in the Recordation  
Form. All notices or process in proceedings affecting this registration may be served  
upon or addressed to them.

Respectfully submitted,

May 14, 2008  
Date

Mohamad-Hilal Fawaz  
Mohamad-Hilal Fawaz,  
Vice-President of Registrant



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Counselors at Law**

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June 3, 2008

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**CERTIFIED MAIL/RETURN RECEIPT**

Re: Trademark Assignment  
Our Client: SPPC PARIS BLEU  
Our File No. 6788/C776-119

Dear Director:

Enclosed is a Recordation Form Cover Sheet as well as a check in the amount of \$40.00 as the filing fee. Please cause the Recordation Form Cover Sheet to be recorded with your office to record a change of name on the part of the registrant.

If you have any questions in connection with the enclosed documents please contact me. Thank you for your courtesy and assistance.

Very truly yours,

HUTCHINSON, COX, COONS,  
DuPRIEST, ORR & SHERLOCK, P.C.

James K. Coons

JKC/bf  
Enclosures