

Form PTO-1594 (Rev. 07/05)
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1. Name of conveying party(ies):

EchoStar Satellite L.L.C.

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

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: DISH Network L.L.C.

Internal Address: _____

Address: _____

Street Address: 9601 S. Meridian Blvd

City: Englewood

State: CO

Country: United States Zip: 80112

- Association Citizenship _____
- General Partnership Citizenship _____
- Limited Partnership Citizenship _____
- Corporation Citizenship Colorado
- 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) 2-29-08

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

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)

3066071

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: Max Gratton

Internal Address: DISH Network L.L.C.

Legal Department _____

Street Address: 9601 S. Meridian Blvd

City: Englewood

State: CO Zip: 80112

Phone Number: 303 723 1616

Fax Number: 303 723 1699

Email Address: max.gratton@echostar.com

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40

- 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 50-4577

Authorized User Name Max Gratton

9. Signature:

7-1-08

Signature

Date

Max Gratton

Total number of pages including cover sheet, attachments, and document: 3

Name of Person Signing

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
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7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

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