

12/15/08

12-16-2008



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To the Director of the U. S. Pat

and documents or the new address(es) below.

1. Name of conveying party(ies):
INXPO LLC

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

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

2. Name and address of receiving party(ies) Yes
 No

Additional names, addresses, or citizenship attached? Yes No

Name: INXPO, INC.
Internal Address: _____
Address: _____
Street Address: 770 N Halsted, Suite 6S
City: CHICAGO
State: ILLINOIS
Country: USA Zip: 60622

Association Citizenship _____
 General Partnership Citizenship _____
 Limited Partnership Citizenship _____
 Corporation Citizenship USA, Delaware
 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) December 27, 2007

Assignment Merger
 Security Agreement Change of Name
 Other _____

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

A. Trademark Application No.(s)
77563687; 77549613

B. Trademark Registration No.(s)
78398526

Additional sheet(s) attached? Yes No

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

InXpo, XpoCast, vBiz

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

Name: Bonnie Page
Internal Address: _____
Street Address: 770 N Halsted Suite 6S
City: CHICAGO
State: ILLINOIS Zip: 60622
Phone Number: (312)962-3742
Fax Number: _____
Email Address: BPAGE@INXPO.COM

6. Total number of applications and registrations involved: 3

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$120.00

Authorized to be charged to deposit account
 Enclosed

8. Payment Information:
Refund Ref: 12/15/2008 DBYRNE 0000165510
CHECK Refund Total: \$30.00
Deposit Account Number _____
Authorized User Name _____

9. Signature: _____
Signature
Malcolm Lotzoff, InXpo CEO
Name of Person Signing

12/15/2008 DBYRNE 00000054 77563687
01 FC:8521 Date 40.00
02 FC:8522 50.00
Total number of pages including cover sheet, attachments, and document:

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

SUPPORTING DOCUMENTATION FOR TRADEMARK
CHANGE OF NAME DOCUMENTS IS

NO LONGER REQUIRED

UNDER THE

TRADEMARK LAW TREATY ACT

EFFECTIVE

OCTOBER 30, 1999