

6/9/09

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06-11-2009

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

Form PTO-1594 (Rev. 01-09)
OMB Collection 0651-0027 (exp. 02/28/2009)

RECO
TF



103563557

To the Director of the U. S. Patent and Trade

is or the new address(es) below.

1. Name of conveying party(ies):

Textron Financial Corporation
c/o Franchise Finance Division

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

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

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

Execution Date(s) MAY 20, 2009

- Assignment
- Security Agreement
- Other Termination of Security Interest
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Checkers Drive-In Restaurants, Inc.

Internal

Address: _____

Street Address: 4300 West Cypress Street

City: Tampa

State: FL

Country: USA Zip: 33607

- Association
- General Partnership
- Limited Partnership
- Corporation
- 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)

73376683

B. Trademark Registration No.(s)

Additional sheet(s) attached? Yes No

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

Checkers

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

Name: Todd Timmerman

Internal Address: _____

Street Address: c/o Shumaker, Loop & Kendrick, LLP

101E. Kennedy Blvd., Suite 2800

City: Tampa

State: FL Zip: 33602

Phone Number: (813) 229-7600

Fax Number: (813) 228-1660

Email Address: timmerman@slk.law.com

6. Total number of applications and registrations involved:

33

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 840

- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

Deposit Account Number _____

Authorized User Name _____

9. Signature:

[Handwritten Signature]
Signature

5-20-09

Date

AMARYN PENEZ

Name of Person Signing

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

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

Item 4 (Continued)

Trademark Application Number:	Identification or Description of Trademark(s):
73486282	Checkers Char Grilled Chicken & Ribs
73524564	Rally's Hamburgers
73730071	Rally Q
74025804	Champ Burger
74034589	Checkers Burger-Fries-Colas
74197709	Rally's
74247076	
74247077	
74285575	
74289649	
74312201	Checkers
74362647	Rallyburger
74410990	Rally's
74410991	Rally's
74420802	Smokin' Sausage
74427350	Rally's Has It Right
74543637	One Taste and You're Ours
74551724	Twice as Good Twice as Fast
74575357	Big Buford
74588831	Monster Combo
74613596	Honeygrilled Chicken
74649362	Checkers Burgers Fries Colas
74703267	L.A. Mex
74733206	L.A. Mex Grande Food!
74734379	L.A. Mex
75667937	Fresh. Because We Just Made It.
75706947	Checker-Q
75728484	Smokin' Sausage
75809436	Cheese Double Cheese
75838284	Cheese Double Cheese
75838286	High Performance Human Fuel
82293932	

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
J. Todd Timmerman (813) 229-7600

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**J. Todd Timmerman, Esq.
 Shumaker, Loop & Kendrick, LLP
 101 E. Kennedy Blvd., Suite 2800
 Tampa, FL 33602**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

Security interest recorded against 33 trademarks; reel/frame 2153/0150.

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. **ASSIGNMENT (full or partial):** Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects Debtor *or* Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.

DELETE name: Give record name to be deleted in item 6a or 6b.

ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d. <u>SEE INSTRUCTIONS</u>	ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any
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NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of **DEBTOR** authorizing this Amendment.

9a. ORGANIZATION'S NAME
Textron Financial Corporation c/o Franchise Finance Division

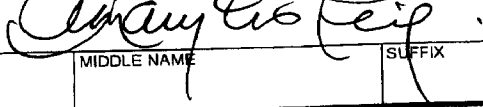
OR

9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX



10. OPTIONAL FILER REFERENCE DATA

International Association of Commercial Administrators (IACA) (REV. 05/22/02)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC3)

RECORDED: 06/09/2009

TRADEMARK
REEL: 004002 FRAME: 0961