

Form PTO-1594 (Rev. 01-09)
OMB Collection 0651-0027 (exp. 02/2)

12-29-2009

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



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To the Director of the U. S. Patent

103584783

Additional documents or the new address(es) below.

1. Name of conveying party(ies):

Scala Packing Company, Inc.

- Individual(s)
- General Partnership
- Corporation- State: Illinois
- 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) November 20, 2009

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

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Scala's Original Beef & Sausage Company, LLC

Internal

Address:

Street Address: 351 W. Huron Street

City: Chicago

State: Illinois

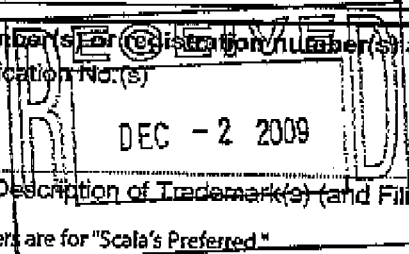
Country: USA Zip: 60610

- Association Citizenship
- General Partnership Citizenship
- Limited Partnership Citizenship
- Corporation Citizenship
- Other LLC Citizenship Delaware

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)



B. Trademark Registration No.(s)

3,500,974 & 3,503,926

Additional sheet(s) attached? Yes No

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

Both registration numbers are for "Scala's Preferred"

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

Name: Joseph B. Ziccardi

Internal Address: Suite 1100

Street Address: 20 N. Clark Street

City: Chicago

State: Illinois Zip: 60602

Phone Number: 312-372-3477

Fax Number: 312-372-4684

Email Address: jziccardi@ziccardilaw.com

6. Total number of applications and registrations involved:

2

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$65.00

- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

12/02/2009 NJAMR1 00000032 3500974

Deposit Account Number 01 FC: 8521 40.00 DP
200310522 25.00 DP

Authorized User Name

9. Signature: X Pascal Scala
Signature

11/23/09
Date

Name of Person Signing

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

