

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	03/24/2010

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
CB TM LLC		03/23/2010	LIMITED LIABILITY COMPANY: CALIFORNIA

RECEIVING PARTY DATA

Name:	Coldwell Banker Real Estate LLC
Street Address:	1 Campus Drive
City:	Parsippany
State/Country:	NEW JERSEY
Postal Code:	07054
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA

PROPERTY NUMBERS Total: 7

Property Type	Number	Word Mark
Registration Number:	3276900	COLDWELL BANKER RESIDENTIAL BROKERAGE ACCREDITED REAL ESTATE PROFESSIONAL
Registration Number:	2034125	HOMEMATCH
Registration Number:	3011158	TECHEASE
Registration Number:	2217143	THE CONDO STORE
Registration Number:	1428703	THE HOME TEAM
Registration Number:	2850620	WE ARE FLORIDA
Registration Number:	3151006	MYCONNECT1

CORRESPONDENCE DATA

Fax Number: (973)407-5331
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
 Phone: 973-407-5269
 Email: uspto.mail@realogy.com

900159750

**TRADEMARK
 REEL: 004186 FRAME: 0383**

CH \$190.00 3276900

Correspondent Name: Joan T. Pinaire
Address Line 1: 1 Campus Drive
Address Line 4: Parsippany, NEW JERSEY 07054

ATTORNEY DOCKET NUMBER:

CB

NAME OF SUBMITTER:

AnnMarie Tedesco

Signature:

/AnnMarie Tedesco/

Date:

04/15/2010

Total Attachments: 2

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State of California
Secretary of State



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) is a full, true and correct copy of the original record in the custody of this office.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

MAR 25 2010

Debra Bowen

DEBRA BOWEN
Secretary of State



State of California
Secretary of State

OBE MERG

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

MAR 24 2010

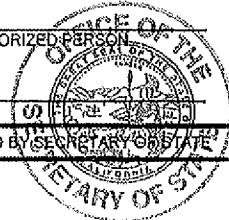
Certificate of Merger

(California Corporations Code sections
1113(g), 6019.1, 8019.1, 9640, 12540.1, 15911.14, 16915(b) and 17552)

IMPORTANT — Read all instructions before completing this form.

This Space For Filing Use Only

1. NAME OF SURVIVING ENTITY Coldwell Banker Real Estate LLC	2. TYPE OF ENTITY LLC	3. CA SECRETARY OF STATE FILE NUMBER 200718410138	4. JURISDICTION CA												
5. NAME OF DISAPPEARING ENTITY CB TM LLC	6. TYPE OF ENTITY LLC	7. CA SECRETARY OF STATE FILE NUMBER 200718710180	8. JURISDICTION CA												
9. THE PRINCIPAL TERMS OF THE AGREEMENT OF MERGER WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALLED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, SPECIFY THE CLASS AND THE NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE ON THE MERGER AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS. ATTACH ADDITIONAL PAGES, IF NECESSARY.															
<p align="center"><u>SURVIVING ENTITY</u></p> <table border="0"> <tr> <td><u>CLASS AND NUMBER</u></td> <td>AND</td> <td><u>PERCENTAGE VOTE REQUIRED</u></td> </tr> <tr> <td>100% Membership Interests</td> <td></td> <td>100%</td> </tr> </table>		<u>CLASS AND NUMBER</u>	AND	<u>PERCENTAGE VOTE REQUIRED</u>	100% Membership Interests		100%	<p align="center"><u>DISAPPEARING ENTITY</u></p> <table border="0"> <tr> <td><u>CLASS AND NUMBER</u></td> <td>AND</td> <td><u>PERCENTAGE VOTE REQUIRED</u></td> </tr> <tr> <td>100% Membership Interests</td> <td></td> <td>100%</td> </tr> </table>		<u>CLASS AND NUMBER</u>	AND	<u>PERCENTAGE VOTE REQUIRED</u>	100% Membership Interests		100%
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100% Membership Interests		100%													
10. IF EQUITY SECURITIES OF A PARENT PARTY ARE TO BE ISSUED IN THE MERGER, CHECK THE APPLICABLE STATEMENT. <input type="checkbox"/> No vote of the shareholders of the parent party was required. <input type="checkbox"/> The required vote of the shareholders of the parent party was obtained.															
11. IF THE SURVIVING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, PROVIDE THE REQUISITE CHANGES (IF ANY) TO THE INFORMATION SET FORTH IN THE SURVIVING ENTITY'S ARTICLES OF ORGANIZATION, CERTIFICATE OF LIMITED PARTNERSHIP OR STATEMENT OF PARTNERSHIP AUTHORITY RESULTING FROM THE MERGER. ATTACH ADDITIONAL PAGES, IF NECESSARY.															
12. IF A DISAPPEARING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, AND THE SURVIVING ENTITY IS NOT A DOMESTIC ENTITY OF THE SAME TYPE, ENTER THE PRINCIPAL ADDRESS OF THE SURVIVING ENTITY. PRINCIPAL ADDRESS OF SURVIVING ENTITY CITY AND STATE ZIP CODE															
13. OTHER INFORMATION REQUIRED TO BE STATED IN THE CERTIFICATE OF MERGER BY THE LAWS UNDER WHICH EACH CONSTITUENT OTHER BUSINESS ENTITY IS ORGANIZED. ATTACH ADDITIONAL PAGES, IF NECESSARY.															
14. STATUTORY OR OTHER BASIS UNDER WHICH A FOREIGN OTHER BUSINESS ENTITY IS AUTHORIZED TO EFFECT THE MERGER.		15. FUTURE EFFECTIVE DATE, IF ANY ____/____/____ (Month) (Day) (Year)													
16. ADDITIONAL INFORMATION SET FORTH ON ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE PART OF THIS CERTIFICATE.															
17. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.															
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY <i>Seth I. Truwit</i>		DATE 3/23/2010													
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY		TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON Seth I. Truwit, Sr.VP & Asst. Secretary on behalf of Member, Coldwell Banker LLC													
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY <i>Seth I. Truwit</i>		DATE 3/23/2010													
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY		TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON Seth I. Truwit, Sr.VP & Asst. Secretary on behalf of Member, Realogy Services Group LLC													
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY		TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON													
For an entity that is a business trust, real estate investment trust or an unincorporated association, set forth the provision of law or other basis for the authority of the person signing: _____															



OBE MERGER-1 (REV 01/2010)

APPROVED BY SECRETARY OF STATE