

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	RELEASE BY SECURED PARTY

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Wells Fargo Capital Finance, Inc.	FORMERLY Wells Fargo Foothill, Inc.	10/27/2010	CORPORATION: CALIFORNIA

RECEIVING PARTY DATA

Name:	North Pacific Group, Inc
Street Address:	10200 SW Greenburg Rd.
City:	Portland
State/Country:	OREGON
Postal Code:	97223
Entity Type:	CORPORATION: OREGON

Name:	McClain Forest Products, LLC
Street Address:	200 E. 8th Street, Suite 208
City:	Mountain Home
State/Country:	ARKANSAS
Postal Code:	72653
Entity Type:	LIMITED LIABILITY COMPANY: ARKANSAS

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark
Registration Number:	3252511	SPRINGCREEK FLOORING
Registration Number:	3252512	SPRINGCREEK FLOORING BY NORTH PACIFIC

CORRESPONDENCE DATA

Fax Number: (479)521-9600
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
 Phone: 479-521-9996
 Email: gjohnson@bassettlawfirm.com
 Correspondent Name: Grace K. Johnson

OP \$65.00 3252511

900175087

**TRADEMARK
 REEL: 004305 FRAME: 0272**

Address Line 1: 221 N. College
Address Line 4: Fayetteville, ARKANSAS 72701

NAME OF SUBMITTER:	Grace K. Johnson, Counsel for McC FP
Signature:	/Grace K. Johnson/
Date:	10/27/2010

Total Attachments: 6
source=Lien releases on Trademark by creditor#page1.tif
source=Lien releases on Trademark by creditor#page2.tif
source=Lien releases on Trademark by creditor#page3.tif
source=Lien releases on Trademark by creditor#page4.tif
source=Lien releases on Trademark by creditor#page5.tif
source=Lien releases on Trademark by creditor#page6.tif

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
 Michele A. Eason, (213) 891-5933

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Buchalter Nemer
 1000 Wilshire Blvd.
 15th Floor
 Los Angeles, CA 90017
 Attn: Michele A. Eason, Senior Paralegal

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #
 7471488 filed 12/14/2006

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: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.
 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 7d-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d. ADD'L INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.
 Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

Secured Party hereby releases its security interest in the following ONLY: Ownership rights, title and interest in and to and rights to use the names and registered trademarks "Springcreek Flooring", Registration Number 3252511 and "Springcreek Flooring by North Pacific", Registration Number 3252512 which were sold to McClain Forest Products, LLC, an Arkansas limited liability company ("Purchaser") by North Pacific Group, Inc., an Oregon corporation, acting by and through Edward Hostmann Inc., an Oregon corporation, as its receiver ("Debtor") pursuant to that certain Asset Purchase Agreement, dated as of April 19, 2010, by and between Purchaser and Debtor (the "APA"), and amended by the parties.

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
 Wells Fargo Capital Finance, Inc. f/k/a Wells Fargo Foothill, Inc., as Administrative and Swingline Lender

OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
 Michele A. Eason, (213) 891-5933

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

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 15th Floor
 Los Angeles, CA 90017
 Attn: Michele A. Eason, Senior Paralegal

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1a. INITIAL FINANCING STATEMENT FILE #
 616323 filed 03/31/2003

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 effects Debtor 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. Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c
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 ADD name. Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

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6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d. ADD'L INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.
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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
 Wells Fargo Capital Finance, Inc. f/k/a Wells Fargo Foothill, Inc., as Administrative and Swingline Lender

OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
 Michele A. Eason, (213) 891-5933

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

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 1000 Wilshire Blvd.
 15th Floor
 Los Angeles, CA 90017
 Attn: Michele A. Eason, Senior Paralegal

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1a. INITIAL FINANCING STATEMENT FILE #
 616324 filed 03/31/2003

1b. The 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.

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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: Give current record name in item 8a or 8b; also give new name (if name change) in item 7a or 7b; and/or new address (if address change) in item 7c.
 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 7d-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d. ADD'L INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.
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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
 Wells Fargo Capital Finance, Inc. f/k/a Wells Fargo Foothill, Inc., as Administrative and Swingline Lender

OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

Michele A. Eason, (213) 891-5933

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

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1000 Wilshire Blvd.
15th Floor
Los Angeles, CA 90017
Attn: Michele A. Eason, Senior Paralegal

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1a. INITIAL FINANCING STATEMENT FILE #
616325 filed 03/31/2003

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

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6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

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

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

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9a. ORGANIZATION'S NAME Wells Fargo Capital Finance, Inc. f/k/a Wells Fargo Foothill, Inc., as Administrative and Swingline Lender			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

Michele A. Eason, (213) 891-5933

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

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Los Angeles, CA 90017
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1a. INITIAL FINANCING STATEMENT FILE #
616328 filed 03/31/2003

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

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

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d. ADDITIONAL INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any NONE

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

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9a. ORGANIZATION'S NAME

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OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**