

**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
Wachovia Capital Finance Corporation (Canada)		10/05/2010	CORPORATION: CANADA

**RECEIVING PARTY DATA**

Name:	Premiumwear, Inc.
Street Address:	5500 Feltl Road
City:	Minnetonka
State/Country:	MINNESOTA
Postal Code:	55343
Entity Type:	CORPORATION: DELAWARE

**PROPERTY NUMBERS Total: 9**

Property Type	Number	Word Mark
Serial Number:	76587720	H2O MOISTURE WICKING
Serial Number:	76587721	H2O MOISTURE WICKING
Serial Number:	76587722	PT PAGE & TUTTLE
Serial Number:	76587723	PAGE & TUTTLE
Serial Number:	76598833	COOL SWING
Serial Number:	76611265	DERMA2
Serial Number:	77223642	COOL ELITE
Serial Number:	77901288	PAGE & TUTTLE
Serial Number:	78523888	COOL SWING

**CORRESPONDENCE DATA**

Fax Number: (952)842-1742  
*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*  
 Phone: 952-896-3309  
 Email: ipgroup@larkinhoffman.com

**900176036**

**TRADEMARK  
 REEL: 004419 FRAME: 0771**

**OP \$240.00 76587720**

Correspondent Name: James P. Quinn  
Address Line 1: 1500 Wells Fargo Plaza  
Address Line 2: 7900 Xerxes Avenue South  
Address Line 4: Minneapolis, MINNESOTA 55431

ATTORNEY DOCKET NUMBER:	29900.00004
NAME OF SUBMITTER:	James P. Quinn
Signature:	/James P. Quinn/
Date:	11/22/2010

Total Attachments: 1  
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Filing NO: 20102170834  
 Filing Date: 2010/10/05  
 Filing Time: 2:25 PM  
 State of Minnesota  
 Processing Office: Secretary of State  
 Filed by: dusth01

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
**James Thornton 404-527-8118**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

CSC/USCS Acct. 31509  
 380 JACKSON ST, SUITE 700  
 ST. PAUL, MN 55101

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #  
**201018793877 (filed 1/19/2010)**

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 8a or 8b.  **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

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. **SEE INSTRUCTIONS** 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.

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  
**Wachovia Capital Finance Corporation (Canada)**

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

10. **OPTIONAL FILER REFERENCE DATA**  
**32128.0001 file with Minnesota Secretary of State**

531585-1

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02) International Association of Commercial Administrators (IACA)