

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM351985

| | | | |
|---|---|-----------------------|-------------------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT | | |
| NATURE OF CONVEYANCE: | UCC Evidencing Termination of Security Interest | | |
| CONVEYING PARTY DATA | | | |
| Name | Formerly | Execution Date | Entity Type |
| Fleet Capital Corporation | | 08/25/2003 | CORPORATION: CALIFORNIA |
| RECEIVING PARTY DATA | | | |
| Name: | Dixieline Lumber Company | | |
| Street Address: | 2001 BRYAN STREET | | |
| City: | Dallas | | |
| State/Country: | TEXAS | | |
| Postal Code: | 75201 | | |
| Entity Type: | CORPORATION: DELAWARE | | |
| PROPERTY NUMBERS Total: 1 | | | |
| Property Type | Number | Word Mark | |
| Registration Number: | 1867321 | DIXIELINE | |
| CORRESPONDENCE DATA | | | |
| Fax Number: | 2124464900 | | |
| <i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i> | | | |
| Phone: | 2124464800 | | |
| Email: | hayley.smith@kirkland.com | | |
| Correspondent Name: | Kirkland & Ellis LLP | | |
| Address Line 1: | Attn Hayley Smith, Sr. Legal Assistant | | |
| Address Line 2: | 601 Lexington Avenue | | |
| Address Line 4: | New York, NEW YORK 10022 | | |
| ATTORNEY DOCKET NUMBER: | 31223-111 | | |
| NAME OF SUBMITTER: | Hayley Smith | | |
| SIGNATURE: | //Hayley Smith// | | |
| DATE SIGNED: | 08/19/2015 | | |
| Total Attachments: 1 | | | |
| source=Fleet to Dixieline Release#page1.tif | | | |

CH \$40.00 1867321



Return TO:
LexisNexis Document Solutions
30 Old Rudnick Lane
Dover, DE 19901
Phone: (302) 736-4300

DELAWARE DEPARTMENT OF STATE
U.C.C. FILING SECTION
FILED 04:57 PM 08/25/2003
INITIAL FILING NUM: 1044594 5
AMENDMENT NUMBER: 3221466 9
SRV: 030551958



9609495 - 2

Federal Express (FX RE N) - ("DOV")
Debtor: Dixieline Lumber Company
Juris: Secretary of State, DE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

10445945 filed 05/18/2001 with the Delaware S/S

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. TAX I.D.#: SSN OR EIN | ADD'L INFO RE ORGANIZATION DEBTOR | 7e. TYPE OF ORGANIZATION | 7f. JURISDICTION OF ORGANIZATION |
| | | | 7g. ORGANIZATIONAL I.D.#. If any <input type="checkbox"/> 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 | | | |
| OR | 9b. INDIVIDUAL'S LAST NAME | | |
| | FIRST NAME | MIDDLE NAME | SUFFIX |

10. OPTIONAL FILER REFERENCE DATA

Debtor: Dixieline Lumber Company