To the Honorabie Commission of Patents  10.1 386818 original documents or copy thereof.  11. Name of conveying party(ies):    Codorniu Napa, Inc.   CPR/FINANCE   Name and address of receiving party(ies)		M PTO-1594 6-S3)	RECC	06-	22-2	2000	EET	U.S. DEPARTMENT OF Patent and Trad		
1. Name of conveying party(les):    Codorniu Napa, Inc.   Codorniu							441	CODORNIU NAPA	and Design	
1. Name of conveying party(ies)  Codorniu Napa, Inc.  ORREFINANCE   Individual(s)   Association   Corporation   Corporation   Composition   Corporation   Co	To the Honorable Commission of Patents 1013				1386	818	original documents or copy thereof.			
Internal Address:   Street Address:   Sant Sadurni d'Anola	1.									
General Partnership   Limited Partnership   Corporation   Other		Codorniu Napa, Inc.	OPR/I	FIMANOR	30	Name:	Codorniu,	, S.A.		
Additional name(s) of conveying party(les) attached?   Yes		☐ General Partnership	ASSOCIATION							
Additional name(s) of conveying party(ses) attached?      Assignment				= 1010000	_					
Association   Association   Association   Association   Association   Association   Association   Association   Association   April 19, 2000   Additional number(s)   Additional number(s)   Additional number(s)   Additional numbers attached?   Additional number   Additional numbers attached?   Additional number   Ad	Additional name(s) of conveying party(ies) attached? ☐ Yes <b>2</b> No									
Assignment Security Agreement Change of Name Corporation Cherr Security Agriculture Partnership Corporation Cherr Security Cherry Security	3.	•				☐ Association				
Security Agreement										
Execution Date: April 19, 2000    Content   Co		Security Agreement	□ Change of Nam	e		☐ Limited Pa	artnership			
representative designation is attached:		Other			.	Other				
4. Application number(s) or patent number(s):  A. Trademark Application No.(s)  B. Trademark Registration No.(s)  2,334,710  Additional numbers attached? □ Yes ■ No  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: Gabrielle E. Higgins  Internal Address: Fish & Neave  1251 Avenue of the Americas  City: New York State: NY ZIP: 10020  36/21/2000 DMSUYEN 00000130 2334710  Do Not Use This space  9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Additional name(s) & address(es) attached? □ Yes ■ No  B. Trademark Registration No.(s)  2,334,710  6. Total number of applications and registrations involved: □  1  7. Total fee (37 CFR 3.41)	Execution Date: April 19, 2000				repr	representative designation is attached: 🕻 Yes 🚨 No				
A. Trademark Application No.(s)  Additional numbers attached?  No.    Says and address of party to whom correspondence concerning document should be mailed:    Says and address of party to whom correspondence concerning document should be mailed:    Says and address of party to whom correspondence concerning document should be mailed:    Says and address of party to whom correspondence concerning document should be mailed:    Says and address of party to whom correspondence concerning document should be mailed:    Says and address of party to whom correspondence concerning document should be mailed:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning document internal Address:    Says and address of party to whom correspondence concerning to the party to wh	4	Application number(s) o	r patent number(s):							
Additional numbers attached? Yes No  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: Gabrielle E. Higgins  Internal Address: Fish & Neave  1251 Avenue of the Americas  City: New York State: NY ZIP: 10020  105/21/2000 DHGUYEN 00000130 2334710  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins Mame of Person Signing  Additional numbers attached? Yes No  1 No  1 Total number of applications and registrations involved:  1	•••	/ (ppiloditori riailizo) (e) e								
Additional numbers attached? Yes No  5. Name and address of party to whom correspondence concerning document should be mailed:  Name: Gabrielle E. Higgins  Internal Address: Fish & Neave  1251 Avenue of the Americas  City: New York State: NY ZIP: 10020  Street Address: New York State: NY ZIP: 10020  Do Not use This space  9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins Name of Person Signing  Additional numbers attached? Yes No  6. Total number of applications and registrations involved:  7. Total fee (37 CFR 3.41)		A. Trademark Application No.(s)				B. Trademark Registration No.(s)				
5. Name and address of party to whom correspondence concerning document should be mailed:    Name: Gabrielle E. Higgins   Total number of applications and registrations involved:   1   1   1   1   1   1   1   1   1						2,334,	710			
Name:Gabrielle E. Higgins			Additiona	I numbers a	tached?	Yes 🖫	No			
Internal Address:  Street Address:  Fish & Neave  1251 Avenue of the Americas  City:  New York  State:  NY  ZIP:  10020  Street Address:  O6/21/2000 DMGUYEN 00000130 2334710  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins  Name of Person Signing  Name of Person Signing  Street Address:  Authorized to be charged to deposit account  Authorized to be charged to deposit account  Charge excess/credit overpayment to deposit account  Authorized to be charged to deposit account  Charge excess/credit overpayment to deposit account  B. Deposit account number:  (Attach duplicate copy of this page if paying by deposit account)  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  School of the Authorized to be charged to deposit account  Charge excess/credit overpayment to deposit account  8. Deposit account number:  (Attach duplicate copy of this page if paying by deposit account)  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  School of the Authorized to be charged to deposit account	5.				6.					
Street Address: Fish & Neave  1251 Avenue of the Americas  City: New York State: NY ZIP: 10020  06/21/2000 DMGUYEN 00000130 2334710  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins Name of Person Signing  OAuthorized to be charged to deposit account  Charge excess/credit overpayment to deposit account  O6-1075  (Attach duplicate copy of this page if paying by deposit account)  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Signature  Date		Name: <u>Gabr</u>	ielle E. Higgins		_ 7.	Total fee (37	7 CFR 3.41).		\$_40.00	
Street Address: Fish & Neave  1251 Avenue of the Americas  City: New York State: NY ZIP: 10020  06/21/2000 DMGUYEN 00000130 2334710  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins Name of Person Signing  OAuthorized to be charged to deposit account  Charge excess/credit overpayment to deposit account  O6-1075  (Attach duplicate copy of this page if paying by deposit account)  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Signature  Date		Internal Address				■ Enclosed				
Street Address: Fish & Neave  1251 Avenue of the Americas  City: New York State: NY ZIP: 10020  06/21/2000 DNGUYEN 00000130 2334710  DO NOT USE THIS SPACE  9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins Name of Person Signing  Signature  Statement Address: Fish & Neave 1251 Avenue of the Americas  8. Deposit account number:  (Attach duplicate copy of this page if paying by deposit account)  Do NOT USE THIS SPACE  9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Signature Date		mioriai / ida/ oco.			_	Authorized				
1251 Avenue of the Americas   8. Deposit account number:   06-1075   06/21/2000 DMGUYEN 00000130 2334710   00 NOT USE THIS SPACE   9. Statement and signature.   To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.   Gabrielle E. Higgins   Mame of Person Signing   Mame of Person Signing   Signature   Date   Document   Signature   Date		Ctrant Address: Eich S	2 Negye			Charge exc	cess/credit ov	erpayment to deposit a	ccount	
City: New York State: NY ZIP: 10020  06/21/2000 DHGUYEN 00000130 2334710  DO NOT USE THIS SPACE  9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins Name of Person Signing  Name of Person Signing  8. Deposit account number:  06-1075  (Attach duplicate copy of this page if paying by deposit account)  DO NOT USE THIS SPACE  5-22-00  Signature  Date				ricas	_					
O6/21/2000 DNGUYEN 00000130 2334710  O1 FC:481  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins  Name of Person Signing  Name of Person Signing  O6-1075  (Attach duplicate copy of this page if paying by deposit account)  DO NOT USE THIS SPACE  9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Signature  Date	,					Deposit acco	ount number	-		
9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.    Gabrielle E. Higgins   Habrielle E. Higgins   Date	06/21/2000 DHGUYEN 00000130 2334710									
9. Statement and signature.  To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.  Gabrielle E. Higgins  Name of Person Signing  Signature  Signature  Date	01 F	::481	40.00 00			-10=				
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.    Gabrielle E. Higgins   Signature   S-Zz-oo		WARREN TO THE RESERVE		DO NOT US	SE THIS S	PACE			www.	
	9.	To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true								
	Gabrielle E. Higgins Name of Person Signing  Malurielle E. Higgins Signature  5-22-00  Date									
Total number of pages including cover sheet, attachments, and document:  4										
			Total number of pag	ges including co	ver sheet,	attachments, and	document:	4		

TRADEMARK ASSIGNMENT

WHEREAS, Codorniu Napa, Inc., a California corporation, having an

office at 1345 Henry Road, Napa, CA 94559 ("ASSIGNOR"), is the owner of all right,

title and interest in and to the trademark CODORNIU NAPA and Design, Registration

No. 2,334,710, and goodwill represented thereby;

WHEREAS, Codorniu, S.A., a corporation organized under the laws of

Spain, having an office at Sant Sadurni d'Anoia, Barcelona, Spain ("ASSIGNEE"),

wishes to acquire all of ASSIGNOR'S right, title and interest in and to the trademark,

CODORNIU NAPA and Design, Registration No. 2,334,710, and the goodwill

represented thereby;

NOW, THEREFORE, for one dollar (\$1.00) and for other good and

valuable consideration, the receipt of which is hereby acknowledged, ASSIGNOR hereby

assigns to ASSIGNEE all of its right, title and interest in and to the trademark

CODORNIU NAPA and Design, Registration No. 2,334,710, and the goodwill

represented thereby, together with the right to sue and to collect damages for past

infringements of the trademark CODORNIU NAPA and Design, Registration No.

2,334,710.

CODORNIU ŅAPA, INC.

 $\mathbf{B}\mathbf{v}$ 

Michael Kenton

President

TRADEMARK REEL: 002090 FRAME: 0661 STATE OF CALIFORNIA )
: ss.:
COUNTY OF NAPA )

On this 19 day of 1001, 2000, before me personally

came Michael Kenton, who being by me duly sworn did depose and say that he is

President of Codorniu Napa, Inc. the corporation described in and which executed the
foregoing Assignment; that he signed the foregoing Assignment; and that he was
authorized to sign that Assignment.

MARCIA L. LEVY
COMM. # 1211683
NOTARY PUBLIC-CALIFORNIA
NAPA COUNTY
MY COMM. EXPIRES FEB 26, 2003

**RECORDED: 05/30/2000** 

Notary Public