

08-17-2000

FORM PTO-1618A
Expires 06/30/99
OMB 0651-0027



U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

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RECORDATION FORM COVER SHEET TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID #
- Correction of PTO Error
Reel # Frame #
- Corrective Document
Reel # Frame #

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
- Merger
Effective Date
Month Day Year
- Change of Name
- Other

Conveying Party

Mark if additional names of conveying parties attached

Name

Execution Date
Month Day Year

Formerly

- Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

- Individual General Partnership Limited Partnership

Corporation Association

Other

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Citizenship/State of Incorporation/Organization

08/17/2000 DNGUYEN 00000196 500903 1559262

FOR OFFICE USE ONLY

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Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK
REEL: 002121 FRAME: 0126

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)			Registration Number(s)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,559,262"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment: Enclosed Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes No

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. Charges to deposit account are authorized, as indicated herein.

SUSAN L. MIZER

Name of Person Signing

Signature

6/27/00

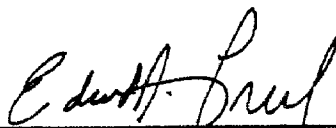
Date Signed

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"WLDD, INC." A DELAWARE CORPORATION,

WITH AND INTO "WCI COMMUNITIES LIMITED PARTNERSHIP" UNDER THE NAME OF "WCI COMMUNITIES LIMITED PARTNERSHIP", A LIMITED PARTNERSHIP ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE TWENTY-FOURTH DAY OF JULY, A.D. 1995, AT 3 O'CLOCK P.M.




Edward J. Freel, Secretary of State

AUTHENTICATION:

2525106 8100M

DATE: 7736697

950282798

12-05-95

TRADEMARK
REEL: 002121 FRAME: 0128

CERTIFICATE OF MERGER
Merging
WLDD, INC.
A DELAWARE CORPORATION,
into
WCI COMMUNITIES LIMITED PARTNERSHIP,
A DELAWARE LIMITED PARTNERSHIP
(Pursuant to Section 263 of the General
Corporation Law of Delaware and
Section 17-211 of the Revised Uniform
Limited Partnership Act of Delaware)

WCI Communities Limited Partnership, a Delaware limited partnership (the "Partnership"), does hereby certify:

1. The names of the constituent entities and the states under the laws of which they are respectively organized are as follows:

<u>Name of Entity</u>	<u>State</u>
WLDD, Inc.	Delaware
WCI Communities Limited Partnership	Delaware

2. An Agreement of Merger, dated as of July 24, 1995, by and between WLDD, Inc. and the Partnership has been approved, adopted, certified, executed and acknowledged by each of the constituent entities in accordance with Section 263(c) of the Delaware General Corporation Law and Section 17-211 of the Revised Uniform Limited Partnership Act of Delaware.

3. The name of the surviving limited partnership in the merger is WCI Communities Limited Partnership.

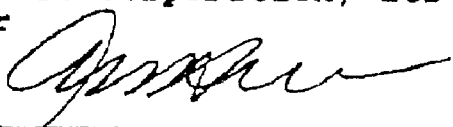
4. The executed Agreement of Merger is on file at the principal place of business of the surviving limited partnership located at 801 Laurel Oak Drive, Suite 500, Naples, Florida 33963.

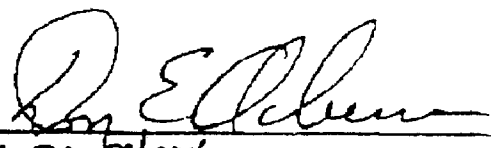
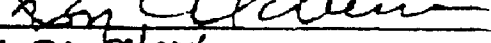
5. A copy of the Agreement of Merger will be furnished by the surviving limited partnership, on request and without cost, to any stockholder of WLDD, Inc. or any partner of the Partnership.

IN WITNESS WHEREOF, the Partnership has caused this Certificate to be signed by its general partner on July 24, 1995.

WCI Communities Limited Partnership

By: A & D Communities, Inc.,
a Delaware corporation, its General
Partner

By: 
Its: President

Attest: 
By: 
Its: secretary

STATE OF Georgia)
COUNTY OF Fulton) SS.

BEFORE ME, a Notary Public in and for said County and State, personally appeared, AL HOFFMAN the PRESIDENT and DON ACKERMAN, the SECRETARY of WCI Communities Limited Partnership, a Delaware limited partnership, who acknowledged that they did sign the foregoing instrument on behalf of said corporation and that the same is the free act and deed of them on behalf of said corporation. They are personally known to me and did not take an oath.

IN TESTIMONY WHEREOF, I have hereunto set my hand and official seal at Atlanta, Georgia, this 24th day of July, 1995.



Sarah D. Kristol
Notary Public
Print Name: SARAH D. KRISTOL
My commission expires: 3-4-97
Commission No. _____