Form **PTO-1594** (Rev. 03/01)



U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

OMB No. 0651-0027 (exp. 5/31)2002/

Tab settings ⇒⇒⇒ ▼ 10264	1856, '▼ ▼ ▼
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.	
Name of conveying party(ies):	2. Name and address of receiving party(ies)
Northeast Comm unications of	Name: Northeast Communications of
Wisconsin, Inc.	Internal P.O. Box 19079 Wisconsin, Inc.
Individual(s) Association	Street Address: 450 Security Blvd.
General Partnership Limited Partnership	
Corporation-State (WI) $6-23-07$	City: <u>Green Bay</u> State: <u>WI</u> zip: <u>54307</u>
Other	Individual(s) citizenship
Additional name(s) of conveying party(ies) attached? 🖵 Yes 🛂 No	Association
3. Nature of conveyance:	General Partnership
Assignment	Limited Partnership
Security Agreement Change of Name	Corporation-State_W1
Other Owner address change	If assignee is not domiciled in the United States, a domestic
Execution Date: / 6/2/03	representative designation is attached:
	Auditional name(s) a audiess(es) attacheur
4. Application number(s) or registration number(s):	D. Trademade Decistration No. (-)
A. Trademark Application No.(s)	B. Trademark Registration No.(s)
N/A	2708256
Additional number(s) attached 📮 Yes 🔀 No	
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name: Tori Lynn Kluess	
Internal Address:	7. Total fee (37 CFR 3.41)\$ 40.00
	☑ Enclosed
	Authorized to be charged to deposit account
Street Address: 231 S. Adams St.	8. Deposit account number:
Street Address: Lot J. Adding Ju.	N/A FIN
City: Green Bay State: WI Zip: 54301	(Attach duplicate copy of this page if paying by deposit account)
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 recopy of the original document.	
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. Brad faul A. Hansen 6/2/03	
Name of Person Signing Signature Date	
Total number of pages including cover sheet, attachments, and document:	
Mail documents to be recorded with required cover sheet information to:	

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