07-17-2007



103429359

U.S. DEPARTMENT OF COMMERCE Form PTO-1594 (Rev. 03/05) United States Patent and Trademark Office OMB Collection 0651-0027 (exp. 6/30/2005) RECORDATION FORM COVER SHEET TRADEMARKS ONLY To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below. 1. Name of conveying party(ies): 2. Name and address of receiving party(ies) Yes Yes Kraus Carpet Mills Limited Additional names, addresses, or citizenship attached? ✓ No Name: Strudex Fibres Limited internal Individual(s) Association Address: General Partnership Limited Partnership Street Address: 65 Northfield Drive ✓ Corporation- State: Ontario City: Waterloo Other State: Ontario Citizenship (see guidelines) Zip: N2J 4J4 Country: Canada Additional names of conveying parties attached? Yes 🗸 No Association Citizenship \_ General Partnership Citizenship 3. Nature of conveyance )/Execution Date(s) : Limited Partnership Citizenship Execution Date(s) 06/30/2004 ✓ Corporation Citizenship Canadian Merger Assignment Other Citizenship ✓ Change of Name Security Agreement If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No \_\_ Other (Designations must be a separate document from assignment) 4. Application number(s) or registration number(s) and identification or description of the Trademark. B. Trademark Registration No.(s) A. Trademark Application No.(s) 78/444052 Additional sheet(s) attached? Yes No C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown): SOFTRELLE filed June 30, 2004 5. Name & address of party to whom correspondence 6. Total number of applications and concerning document should be mailed: 1 registrations involved: Name: Lorelei G. Graham 7. Total fee (37 CFR 2.6(b)(6) & 3.41) Internal Address: Authorized to be charged by credit card Authorized to be charged to deposit account Street Address: 512 Woolwich Street, P.O. Box 930 Enclosed 8. Payment Information: City: Guelph a. Credit Card **Last 4 Numbers** Zip: N1H 6M8 State: Ontario Expiration Date Phone Number: 519,822,9578 ext. 250 b. Deposit Account Number \_\_\_ Fax Number: 519,822,1583 Authorized User Name Email Address: Igraham@inillerthomson.ca 9. Signature: 03/10/2005 Date Total number of pages including cover <u>Lorelei G. Graham</u> sheet, attachments, and document: Name of Person Signing

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

## SUPPORTING DOCUMENTATION FOR TRADEMARK CHANGE OF NAME DOCUMENTS IS

NO LONGER REQUIRED

UNDER THE

TRADEMARK LAW TREATY ACT

**EFFECTIVE** 

OCTOBER 30, 1999

TRADEMARK
REEL: 003585 FRAME: 0344

**RECORDED: 03/11/2005**