

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNS THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Michael Newman		09/24/2010	INDIVIDUAL: UNITED STATES
RECEIVING PARTY DATA			
Name:	ABCSP, Inc.		
Doing Business As:	DBA Always Best Care Senior Services		
Street Address:	1406 Blue Oaks Blvd.		
Internal Address:	Suite 100		
City:	Roseville		
State/Country:	CALIFORNIA		
Postal Code:	95747		
Entity Type:	CORPORATION: CALIFORNIA		
PROPERTY NUMBERS Total: 5			
Property Type	Number	Word Mark	
Registration Number:	3390095	ALWAYS BEST CARE SENIOR SERVICES ABC	
Registration Number:	3385112	HELPING OTHERS MAKING LIFE RICH ALWAYS	
Registration Number:	3559692	ABCUNIVERSITY	
Registration Number:	3563168	ALWAYS BEST CARE	
Serial Number:	85027774	ALWAYS BEST CARE SENIOR SERVICES	
CORRESPONDENCE DATA			
Fax Number:	(703)991-0770		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	703-591-5180		
Email:	vince@amberlylaw.com		
Correspondent Name:	Vincent M. Amberly		
Address Line 1:	10805 Main Street		
Address Line 2:	Suite 700		
Address Line 4:	Fairfax, VIRGINIA 22030		

OP \$140.00 3390095

TRADEMARK

ATTORNEY DOCKET NUMBER:	1004.03
NAME OF SUBMITTER:	VINCENT M. AMBERLY
Signature:	/VMA/
Date:	09/28/2010
Total Attachments: 3 source=Assignment Newman to ABCSP#page1.tif source=Assignment Newman to ABCSP#page2.tif source=Assignment Newman to ABCSP#page3.tif	

ASSIGNMENT

WHEREAS, Michael Newman, an individual and citizen of the United States, with an address at 100 1406 Blue Oaks Blvd., Roseville, CA 95747 ("Newman"), has adopted used, is using and is the owner of the following trademarks, four of which are now registered in the United States Patent and Trademark Office:

<u>Trademark</u>	<u>Registration No.</u>	<u>Date of Registration</u>
ALWAYS BEST CARE SENIOR SERVICES ABC	3,390,095	February 26, 2008
HELPING OTHERS MAKING LIFE RICH ALWAYS	3,385,112	February 19, 2008
ABCUNIVERSITY	3,559,692	January 13, 2009
ALWAYS BEST CARE	3,563,168	January 20, 2009
ALWAYS BEST CARE SENIOR SERVICES	Serial No. 85027774	NA

WHEREAS, Newman filed a trademark application for a Community Trade Mark in Europe, for the mark **ALWAYS BEST CARE SENIOR SERVICES ABC & Device** (in colour); and that the application was registered on November 14, 2009, and **ALWAYS BEST CARE SENIOR SERVICES ABC & Device** (in colour), was issued Community Trade Mark Reg. No. 8243801, Registered 14/11/2009 ("European Community Trade Mark").

WHEREAS, ABCSP, Inc. is a California corporation whose address is 1406 Blue Oaks Blvd., Suite 100, Roseville, CA 95747 ("ABCSP"), and ABCSP is desirous of acquiring the above trademarks and the application and registrations thereof.

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, Newman does hereby assign unto ABCSP all right, title and interest in the marks identified in U.S. Reg. Nos. 3,390,095, 3,385,112, 3,559,692, 3,563,168, and Serial No. 85027774, as well as the European Community Trade Mark Reg. No. 8243801, together with the goodwill of the business connected with the use of and symbolized by said trademarks, and the above identified application and registrations thereof.

Michael Newman
An Individual

By: [Signature]

Date: 9/29/10

Witness: [Signature]
Date: 9/29/10

STATE OF CALIFORNIA
COUNTY OF _____

)
) see attached
)

Before me, a Notary Public in and for the jurisdiction aforesaid, personally appeared the person known to me or proved to me to be the above signed MICHAEL NEWMAN, and affixed his above signature as his very act and deed, all on this ____ day of _____, 2010.

Notary Public

My commission expires: _____ Date:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Placer

On 9-24-2010 before me, Valerie D. McGuire, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Michael Newman
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal Above

Signature [Handwritten Signature]
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Assignment

Document Date: 9-24-2010 Number of Pages: 2

Signer(s) Other Than Named Above: Carly Moore, Witness

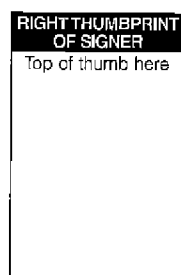
Capacity(ies) Claimed by Signer(s)

- Signer's Name: _____
- Individual
 - Corporate Officer — Title(s): _____
 - Partner — Limited General
 - Attorney in Fact
 - Trustee
 - Guardian or Conservator
 - Other: _____



Signer is Representing: _____

- Signer's Name: _____
- Individual
 - Corporate Officer — Title(s): _____
 - Partner — Limited General
 - Attorney in Fact
 - Trustee
 - Guardian or Conservator
 - Other: _____



Signer is Representing: _____