03-03-1999 FORM PTO-1618A Patent and Trademark Office Expires 06/30/99 OMB 0651-0027 TRADEMARK 100979106 02-22-1999 RECORDATION FORM COVER SHEET U.S. Patent & TMOfc/TM Mail Rcpt Dt. #22 TRADEMARKS ONLY TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies) Submission Type Conveyance Type X License **Assignment** New (Non-Recordation) Resubmission **Nunc Pro Tunc Assignment Security Agreement** Document ID # **Effective Date** Month Day Year **Correction of PTO Error** Merger Reel # Frame # Change of Name **Corrective Document** Reel # Frame # Other Release of security interest Conveying Party Mark if additional names of conveying parties attached **Execution Date** Month Day Year Name | FLEET CAPITAL CORPORATION 01061999 Formerly SHAWMUT CAPITAL CORPORATION **Association** Individual General Partnership Limited Partnership | X | Corporation Other Citizenship/State of Incorporation/Organization **Receiving Party** Mark if additional names of receiving parties attached Name TOASTMASTER INC. DBA/AKA/TA Composed of 1801 NORTH STADIUM ROAD Address (line 1) Address (line 2) Address (line 3) | COLUMBIA 65202 Zip Code State/Country If document to be recorded is an Individual **Limited Partnership** General Partnership assignment and the receiving party is not domiciled in the United States, an Corporation **Association** appointment of a domestic representative should be attached. Other (Designation must be a separate document from Assignment) DE Citizenship/State of Incorporation/Organization 00000202 359929 28/1999 TTON11 FOR OFFICE USE ONLY 40.00 BP 75.00 DP

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Mail documents to be recorded with required cover sheet(s) information to:

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REEL: 1862 FRAME: 0518

FORM PTO- Expires 06/30/99 OMB 0651-0027	1618B Page 2	U.S. Department of Commerce Patent and Trademark Office TRADEMARK
Domestic R	Representative Name and Address Enter for the first Receiving Par	ty only.
Name		
Address (line 1)		
Address (line 2)		
Addiess (ille 2)		
Address (line 3)		
Address (line 4)		
Correspond	dent Name and Address Area Code and Telephone Number 816-932-44	00
Name	JENNIFER H. HAMMOND	
Address (line 1)	SONNENSCHEIN NATH & ROSENTHAL	
Address (line 2)	4520 MAIN STREET	
Address (line 3)	SUITE 1100	
Address (line 4)	KANSAS CITY, MO 64111	
Pages	Enter the total number of pages of the attached conveyance document including any attachments.	# 3
	Application Number(s) or Registration Number(s) Mark if ad e Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for	ditional numbers attached
	demark Application Number(s)	
	0359929 0699340	0714252
	0889665	
Number of	Properties Enter the total number of properties involved. #	
	· Like the total namber of properties involved.	<u>+</u>
Fee Amour	3 [13,00)
Deposit /		
(Enter for p	payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: #	

JENNIFER H. HAMMOND

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

Statement and Signature

Name of Person Signing

Authorization to charge additional fees:

Signature

TRADEMARK REEL: 1862 FRAME: 0519

Yes

No

Date Signed

RELEASE OF TRADEMARK COLLATERAL ASSIGNMENT AND REASSIGNMENT OF TRADEMARK

WHEREAS, Borrower and Lender entered into a certain Loan and Security Agreement dated as of April 18, 1990, as amended (the "Loan Agreement"); and

WHEREAS, the obligations of Borrower to Lender under the Loan Agreement were secured, in part, by a Trademark Collateral Assignment dated as of April 18, 1990, by and between Borrower and Lender and recorded June 21, 1990, in the trademark records of the United States at Reel 0717, frames 319 through 328; and

WHEREAS, the obligations of Borrower to Lender secured by the trademarks have been satisfied;

NOW, THEREFORE, Lender hereby releases its security interest in the trademarks listed on Schedule A, attached hereto and incorporated herein, including any renewals thereof and all rights corresponding thereto, and reassigns to Borrower any and all rights in such trademarks held by Lender, without recourse, representation or warranty.

IN WITNESS WHEREOF, Lender has caused this Release of Trademark Collateral Assignment and Reassignment of Trademark to be executed by its duly authorized representative as of the day and year first above written.

FLEET CAPITAL CORPORATION

Name: Edward M. Bartkowski

Title: Vice President

::ODMA\PCDOCS\ST_LOUIS\519710\1

STATE OF WISCONSÍN)
) SS.
COUNTY OF WAUKESHA)

On January 44, 1999, before me, a Notary Public in and for the County and State aforesaid, personally appeared Edward M. Bartkowski, a duly authorized officer of Fleet Capital Corporation, a Rhode Island corporation, who acknowledged the execution of the foregoing instrument as his own free and voluntary act for and on behalf of such corporation and stated his execution on behalf of such corporation was duly authorized and approved by all appropriate action of such corporation.

[SEAL] KELLY EHRHART

My contentsion expires

Kelly Elikait

Notary Public

SCHEDULE A TO RELEASE OF TRADEMARK COLLATERAL ASSIGNMENT AND REASSIGNMENT OF TRADEMARK

Registration No.	Issue Date	Trademark	Country
0,359,929	09/06/38	TOASTMASTER	U.S.A.
0,699,340	06/14/60	TOASTMASTER	U.S.A.
0,714,252	04/18/61	TOASTMASTER	U.S.A.
0,889,665	04/21/70	TOASTMASTER	U.S.A.

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FEB	12	196	04:24PM	FLEET	CAPITAL/	LEGAL
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FILDIG #0001575077 PG 01 OF 02 P.2/4-00039 FILED 12/01/1995 11:00 AM PAGE 02747 SECRETARY OF THE STATE COMMECTICUT SECRETARY OF THE STATE

CERTIFICATE AMENDING OR RESTATING CERTIFICATE OF INCC 61-38 Rev. \$480 Stack Corporation

77077

STATE OF CONNECTICUT SECRETARY OF THE STATE 30 TRINITY STREET HARTFORD, CT 06106

1.	-Nar	Name of Corporation (Please enter name within lines) Shawnyt Capital Corporation					
2.	The Certificate of Incorporation is: (Check one)						
		٨.	Amended only, pursuant to Corin. Gen. Stat. §33 - 360.				
		₿.	Amended only, to cancel authorized shares (state number of shares to be cancelled, the class, the series, if any, and the par value, P.A. 90-107.)				
		C.	Restated only, pursuant to Conn. Gen. Stat. §33 - \$62(2).				
1		D.	Amended and restated, pursuant to Conn. Gen. Stat. §33 - 362(o).				
		E.	Restated and superseded pursuant to Conn. Gen. Stat. §33 - 362(d).				
	to the mer FUR ame pre	chan mer ger ITHER ended setic	ESOLVED, that the Sy-Laws of the Corporation be, and hereby are, amended ge the name of the Corporation to Fleet Capital Corporation, effective upon ger of Fleet Financial Group, inc. and Shawut National Corporation, which is acheduled to occur on or about November 30, 1995; and be it. RESOLVED, that the Cartificate of incorporation of the Corporation be to reflect such name change upon said marger or as soon thereafter as is ally possible. 28 is checked, go to 5 & 5 to complete this certificate. If 20 or 20 is checked, complete 3A or 3B. If clead, complete 4.)				
3.		eck or					
•		A. of Inc	This certificate purports merely to restate but not to change the provisions of the original Certificate corporation as supplemented and amended to date, and there is no discrepancy between the provisof the original Certificate of Incorporation as supplemented and amended to date, and the provisions is Restated Certificate of Incorporation. (If SA is checked, go to 5 & 6 to complete this certificate.).				
			This Restated Certificate of Incorporation shall give effect to the amendment(s) and purports to the all those provisions now in effect not being amended by such new amendment(s). (If 3B is ked, check 4, if true, and go to 5 & 6 to complete this Certificate.)				
4.	(Che	ock, if	true)				
		quire	restated Certificate of Incorporation was adopted by the greatest vote which would have been red to amend any provision of the Certificate of Incorporation as in effect before such vote and supersuch Certificate of Incorporation.				

28th

. 1

Dated at Glastonbury, CT

Rec, CC, GS: (Type or Print)
Fleet Capital Corporation

200 Glastonbury Soulevard

Glastonbury, CT 06033

Attn: Judith W. Carigila

November

day of

Please provide filer's name and complete address for malling receipt

FFR 12 '96 04: 25PM FLEET CAPITAL/ LEGAL

STATE OF CONNECTICUT
OFFICE OF THE SECRETARY OF THE STATE

HARTFORD

I hereby certify that this is a true copy of record in this Office

in Testimony whereof, I have hereunto set my hand, and affixed the Seal of said State, at Hartford,

SECRETARY OF THE STATE

1000

RECORDED: 02/22/1999