11-14-2002

## RDATION FORM COVER SHEET **ADEMARKS ONLY**

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

| 102280674 ▼                                                                                                                                                                                                      | <b>* * * *</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| To the Honorable Commissioner of Patents and Trademarks:                                                                                                                                                         | Please record the attached original documents or copy thereof.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Name of conveying party(ies):                                                                                                                                                                                    | Name and address of receiving party(ies)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Bank of America, N.A.                                                                                                                                                                                            | Name: Courtesy Corporation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                  | Internal<br>Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| ☐ Individual(s) ☐ Association                                                                                                                                                                                    | Street Address: 800 Corporate Grove Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| ☐ General Partnership ☐ Limited Partnership                                                                                                                                                                      | City: Buffalo Grove State: IL Zip: 60089                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| ☐ Corporation-State                                                                                                                                                                                              | ☐ Individual(s) citizenship                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| ☐ Other National Association                                                                                                                                                                                     | ☐ Individual(s) citizenship ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No                                                                                                                                                  | ☐ Individual(s) citizenship ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 3. Nature of conveyance:                                                                                                                                                                                         | ☐ Limited Partnership ☐ Corporation-State Illinois ☐ Other ☐ If assignee is not domiciled in the United States, a domestic representative designation is attached: ☐ Yes ☐ No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| ☐ Assignment ☐ Merger                                                                                                                                                                                            | ☑ Corporation-State Illinois                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| ☐ Security Agreement ☐ Change of Name                                                                                                                                                                            | ☐ Other ☐ Oth |
| ☑ Other Release of Security Interests                                                                                                                                                                            | If assignee is not domiciled in the United States, a domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Execution Date: October 24, 2002                                                                                                                                                                                 | (Designations must be a separate document from assignment)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Application number(s) or registration number(s):                                                                                                                                                                 | Additional name(s) & address(es) attached? ☐ Yes ☐ No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| A. Trademark Application No.(s)                                                                                                                                                                                  | B. Trademark Registration No.(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| · ·                                                                                                                                                                                                              | 1,377,576 1,377,577 1,379,569                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                  | 1,422,876 1,703,728                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Additional number(s) atta                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <ol><li>Name and address of party to whom correspondence<br/>concerning document should be mailed:</li></ol>                                                                                                     | 6. Total number of applications and registrations involved:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Name: <u>Kimberly E. Zirkle, Paralegal</u>                                                                                                                                                                       | 7. Total fee (37 CFR 3.41) \$140.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Internal Address: Robinson, Bradshaw & Hinson                                                                                                                                                                    | ⊠ Enclosed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                  | Authorized to be charged to deposit account                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Street Address: 101 N. Tryon Street                                                                                                                                                                              | 8. Deposit account number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Suite 1900                                                                                                                                                                                                       | 500327                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| City: Charlotte State: NC Zip: 28246                                                                                                                                                                             | (Attach duplicate copy of this page if paying by deposit account)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| DO NOT USE                                                                                                                                                                                                       | THIS SPACE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 9. Statement and signature.  To the best of my knowledge and belief, the foregoing inform of the original document.  To the best of my knowledge and belief, the foregoing information of the original document. | ation is true and correct and any attached copy is a true copy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Kimberly E. Zirkle, Paralegal  Name of Person Signing                                                                                                                                                            | October 30, 2002 Signature Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| NELLER 00000070 1377576  \                                                                                                                                                                                       | er sheet, attachments, and documents:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 40.00 (Mail documents to be recorded with                                                                                                                                                                        | required cover sheet information to:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

Commissioner of Patents & Trademarks, Box Assignments Washington, D.C. 20231

## RELEASE OF SECURITY INTEREST IN TRADEMARKS

WHEREAS, LLS Corp., an Illinois corporation (the "Borrower"), the Administrative Agent, Credit Suisse First Boston, as Syndication Agent, Bankers Trust Company, as Documentation Agent, and the Lenders entered into that certain Credit Agreement, dated as of July 30, 1999 (as has been and may be amended, modified, supplemented or restated from time to time, the "Credit Agreement").

WHEREAS, in connection with the Credit Agreement, the Borrower, Courtesy Corporation, an Illinois Corporation, Creative Packaging Corp., an Illinois corporation, Courtesy Sales Corp., an Illinois corporation (each a 'Grantor" and collectively, the 'Grantors") and the Administrative Agent entered into that certain Intellectual Property Security Agreement and Assignment, dated as of July 30, 1999 (as may be amended, modified, supplemented or restated from time to time, the 'Security Agreement").

WHEREAS, pursuant to the terms and conditions of the Security Agreement and other loan documents, the Administrative Agent was granted a security interest in certain trade names, trademarks, and service marks, in any and all forms, including, but not limited to, the registered trade names, trademarks and service marks, and all applications for registration of trade names, trademarks, and services marks listed on <u>Schedule A</u> attached hereto, all common law rights to such trade names, trademarks and services marks, the right to recover for all past, present and future infringements thereof, and all other rights of any kind whatsoever accruing thereunder or pertaining thereto (collectively, the "<u>Trademarks</u>").

WHEREAS, the Security Agreement and related security interest was recorded with the United States Patent and Trademark Office as of August 10, 1999, at Reel 1947, Frame 0937 and re-recorded at Reel 2428, Frame 0695.

WHEREAS, the Administrative Agent has received consideration for a full and complete release of the security interest in and liens in the Trademarks, and now wishes to release such security interest and liens in the Trademarks.

NOW THEREFORE, the Administrative Agent represents and agrees as follows:

- 1. The Administrative Agent hereby releases, cancels and terminates its security interest in the entire right, title and interest in and any and all liens it may have on the Trademarks and the goodwill associated with such Trademarks, symbolized by the Trademarks, and all other rights with respect to the Trademarks.
- 2. The Administrative Agent represents and warrants that it has not exercised any of the rights with respect to the Trademarks available to it under its security interest. The Administrative Agent represents and warrants that it has not sold, licensed, conveyed or

TRADEMARK
REEL: 002616 FRAME: 0387

otherwise alienated any rights in and to the Trademarks, and that it has not used or sublicensed any of the Trademarks.

- 3. The Administrative Agent agrees that hereafter it will not take any action with respect to the Trademarks.
- The Administrative Agent shall, at the Grantors' expense, take all further actions. and provide to the Grantors, its successors, assigns or other legal representatives, all such cooperation and assistance (including, without limitation, the execution and delivery of any and all documents or other instruments) reasonably requested by the Grantors to more fully and effectively effectuate the purposes of this Release.

IN WITNESS WHEREOF, the Administrative Agent has caused this Release to be duly executed by its officer thereunto duly authorized as of the date hereof.

BANK OF AMERICA, N.A.,

as Administrative Agent

By: Name:

Title:

- 2 -

## SCHEDULE A TO RELEASE OF SECURITY INTEREST IN TRADEMARKS

| MARK               | REGISTRATION NO. |  |
|--------------------|------------------|--|
| CMT                | 1,377,576        |  |
| COURTESY           | 1,377,577        |  |
| СР                 | 1,379,569        |  |
| SHEAR-PAK          | 1,422,876        |  |
| С                  | 1,703,728        |  |
| СР                 | 1,515,409        |  |
| TILT-TOP           | 1,651,504        |  |
| CREATIVE PACKAGING | 2,295,164        |  |

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- 3 -

**RECORDED: 11/06/2002** 

TRADEMARK REEL: 002616 FRAME: 0389