

FORM PTO-1594  
(Rev. 6-93)  
OMB No. 0651-0011 (exp. 4/94)

# RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

Tab settings ⇨ ⇨ ⇨ ▼

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Canadian Imperial Bank of Commerce

- Individual(s)
- General Partnership
- Corporation-State
- Other Agency
- Association
- Limited Partnership

Additional name(s) of conveying party(ies) attached?  Yes  No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other Release of Lien
- Merger
- Change of Name

Execution Date: October 19, 1998

2. Name and address of receiving party(ies)

Name: Cohen's Kosher Food, LLC

Internal Address: \_\_\_\_\_

Street Address: 2210 W. Oaklawn Dr, AR058124

City: Springdale State: AR ZIP: 72762

- Individual(s) citizenship \_\_\_\_\_
- Association \_\_\_\_\_
- General Partnership \_\_\_\_\_
- Limited Partnership \_\_\_\_\_
- Corporation-State \_\_\_\_\_
- Other Limited Liability Company-Delaware

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No

(Designations must be a separate document from assignment)

Additional name(s) & address(es) attached?  Yes  No

4. Application number(s) or patent number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

2,238,223

Additional numbers attached?  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Essa Hicks

Internal Address: \_\_\_\_\_

Street Address: 2210 W. Oaklawn Dr, AR058124

City: Springdale State: AR ZIP: 72762

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.41).....\$ 40.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

502227

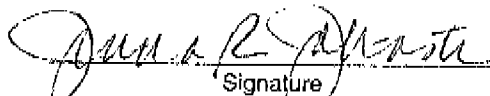
(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Jenna R. Johnston  
Name of Person Signing

  
Signature

November 18, 2003  
Date

Total number of pages including cover sheet, attachments, and document: 5

CH \$40.00 502227 2238223



STATE OF NEW YORK

COUNTY OF NEW YORK

I hereby certify that on this 19<sup>th</sup> day of October, 1998, before the subscriber, a Notary Public personally appeared Henry Hook, who acknowledged himself to be an Employee of Canadian Imperial Bank of Commerce (the "Company") and that he, as such officer, being authorized so to do, executed the foregoing Release of Security Interests for the purpose therein contained by signing the name of the Company by himself as such officer.

Doreen Z. Jones  
Notary Public

DOREEN Z. JONES  
Notary Public, State of New York  
No. 01105064467  
Qualified in Queens County  
Commission Expires 9-9-02



EXHIBIT A  
TO  
RELEASE

TRADEMARK	REGISTERED OWNER	REGISTRATION NUMBER	REGISTRATION DATE
Casino Chef Hors D'oeuvres & Design	Cohen's Kosher Food, L.L.C.	75/329274	7/23/97
Faye's	Restauranic, Inc.	1,648,962	6/25/91