

Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

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

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

1. Name of conveying party(ies):
Equilink Licensing Corporation

Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State Delaware
 Other: _____

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

2. Name and address of receiving party(ies):
Name: Equilink Licensing, LLC

Internal Address: Suite 400
Street Address: 2711 Centerville Road

City: Wilmington
State: Delaware Zip: 19808

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
(Designations must be a separate document from assignment) No

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

3. Nature of Conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other: Change of Licensee/Lisensor Entity Type

Execution Date: [November 20, 2003]

4. Application Number(s) or Registration Number(s):
A. Trademark Application No.(s):
Additional numbers attached? Yes No

B. Trademark Registration No.(s):

0576102	1324742	1337917
1115352	1331021	1355604
1282555	1349370	1353044

5. Name and address of party to whom correspondence concerning document should be mailed:
Name: Erin A. Dugan
Ropes & Gray LLP

Internal Address: Atty. Dkt.: FPIB-124-003
Street Address: One International Place

City: Boston State: MA Zip: 02110

6. Total Number of applications and registrations involved: 13

7. Total fee (37 CFR 3.41) \$ 340.00
 Enclosed
 Authorized to be charged to Deposit Account
 Authorized to be charged to credit card
(Form 2038 enclosed)

8. Deposit account number: 18-1945
(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.

Alexander Manganiello [Signature] 12/19/03
Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments, and document: 6

CH \$340.00 18-1945 0576102

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Additional Conveying Parties (1. Continued):

Additional Receiving Parties (2. Continued):

Assignee Name:
Internal Address:

Street Address:

City: State: Zip Code:

Additional Applications and/or Registration Numbers (4. Continued)

<p>Additional Application Number(s) 4A continued:</p>	<p>Additional Registration Number(s) 4B continued:</p> <p>1362184 1381315 1380816 1388926</p>
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Additional numbers attached? Yes No

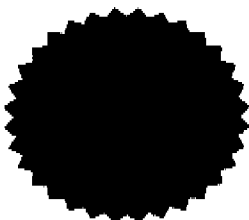
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE CORPORATION UNDER THE NAME OF "EQUILINK LICENSING CORPORATION" TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "EQUILINK LICENSING CORPORATION" TO "EQUILINK LICENSING, LLC", FILED IN THIS OFFICE ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2003, AT 11:20 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

2281538 8100V

AUTHENTICATION: 2762454

030746858

DATE: 11-20-03

TRADEMARK

REEL: 002769 FRAME: 0042

State of Delaware
Secretary of State
Division of Corporations
Delivered 12:04 PM 11/20/2003
FILED 11:20 AM 11/20/2003
SRV 030746858 - 2281538 FILE

**STATE OF DELAWARE
CERTIFICATE OF CONVERSION
FROM A CORPORATION TO
A LIMITED LIABILITY COMPANY
PURSUANT TO SECTION
266 OF THE DELAWARE GENERAL
CORPORATION LAW.**

1.) The name of the corporation immediately prior to filing this Certificate is
Equilink Licensing Corporation

2.) The date the Certificate of Incorporation was filed on is
December 11, 1991

3.) The original name of the corporation as set forth in the Certificate of
Incorporation is Equilink Licensing Corporation

4.) The name of the limited liability company as set forth in the formation is
Equilink Licensing, LLC

5.) The conversion has been approved in accordance with the provisions of
Section 266.

By: 

Authorized Officer

Name: Aron Schwartz

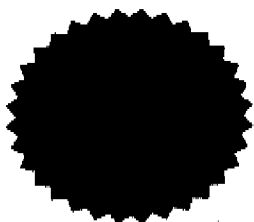
Print or Type Signature

Delaware

PAGE 2

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "EQUILINK LICENSING, LLC" FILED IN THIS OFFICE ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2003, AT 11:20 O'CLOCK A.M.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2281538 8100V

AUTHENTICATION: 2762454

030746858

DATE: 11-20-03 TRADEMARK

REEL: 002769 FRAME: 0044

State of Delaware
Secretary of State
Division of Corporations
Delivered 12:04 PM 11/20/2003
FILED 11:20 AM 11/20/2003
SRV 030746858 - 2281538 FILE

CERTIFICATE OF FORMATION
OF
EQUILINK LICENSING, LLC

This Certificate of Equilink Licensing, LLC (the "LCC"), dated as of November 20, 2003, is being duly executed and filed by Aron Schwartz, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. §18-101, et seq).

FIRST. The name of the limited liability company formed hereby is Equilink Licensing, LLC.

SECOND. The address of the registered office of the LLC in the State of Delaware is c/o Corporation Service Company, 2711 Centerville Road, Suite 400, Wilmington, Delaware 19808.

THIRD. The name and address of the registered agent for service of process on the LLC in the State of Delaware is Corporation Service Company, 2711 Centerville Road, Suite 400, Wilmington, Delaware 19808.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the date first above written.


Name: Aron Schwartz
Authorized Person