

RF

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06-08-2010

Form PTO-1594 (Rev. 01-09)  
OMB Collection 0651-0027 (exp.

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



103599100

APR 19 2010

To the Director of the U. S. P.

documents or the new address(es) below.

1. Name of conveying party(ies):

East West Bank  
Loan Service  
9300 Flair Drive, 6th Floor  
El Monte, CA 91731

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

Citizenship (see guidelines)

Additional names of conveying parties attached?  Yes  No

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached?  Yes  No

Name: R. Leland B. Smith, Jr.  
 Internal Address:  
 Street Address: 2912 Manhattan Avenue  
 City: Manhattan Beach  
 State: California  
 Country: USA Zip: 90266

- Association Citizenship
- General Partnership Citizenship
- Limited Partnership Citizenship
- Corporation Citizenship
- Other Individual Citizenship California

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)

3. Nature of conveyance /Execution Date(s) :

Execution Date(s) April 1, 2010

- Assignment
- Security Agreement
- Other Release - Payoff Statement
- Merger
- Change of Name

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

76008214

B. Trademark Registration No.(s)

2989873

Additional sheet(s) attached?  Yes  No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

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

Name R. Leland B. Smith, Jr.

Internal Address: LN# 3001535

Street Address: 2912 Manhattan Avenue

City Manhattan Beach

State CA Zip 90266

Phone Number

Fax Number

Email Address:

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$40.00

- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

Deposit Account Number 84/20/2010 MIAA1 00000009 76008214

Authorized User Name 01 FC-8521 40.00

9. Signature:

Flor Rodriguez  
Signature

Date

Flor Rodriguez  
Name of Person Signing

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

1

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

6/7/10

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RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

APR 19 2010

To the Director of the U. S. Patent and Trademark Office Please record the attached documents or the new address(es) below.

**1. Name of conveying party(ies):**  
 East West Bank  
 Loan Service  
 9300 Flair Drive, 6th Floor  
 El Monte, CA 91731

Individual(s)       Association  
 General Partnership       Limited Partnership  
 Corporation- State: California  
 Other \_\_\_\_\_

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached?  Yes  No

**2. Name and address of receiving party(ies)**  
 Additional names, addresses, or citizenship attached?  No

Name: Erin L. Murphy  
 Internal  
 Address: \_\_\_\_\_  
 Street Address: 2912 Manhattan Avenue  
 City: Manhattan Beach  
 State: California  
 Country: USA      Zip: 90266

Association      Citizenship \_\_\_\_\_  
 General Partnership      Citizenship \_\_\_\_\_  
 Limited Partnership      Citizenship \_\_\_\_\_  
 Corporation      Citizenship \_\_\_\_\_  
 Other Individual      Citizenship California

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
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**3. Nature of conveyance /Execution Date(s) :**  
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 Security Agreement       Change of Name  
 Other Release = Payoff Statement

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Name \_\_\_\_\_  
 Internal Address: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Fax Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**6. Total number of applications and registrations involved:** 1

**7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$40.00**

Authorized to be charged to deposit account  
 Enclosed

**8. Payment Information:**

Deposit Account Number \_\_\_\_\_  
 Authorized User Name \_\_\_\_\_

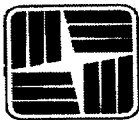
**9. Signature:**

Flor Rodriguez      Signature \_\_\_\_\_      Date \_\_\_\_\_  
 Name of Person Signing

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

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1460, Alexandria, VA 22313-1460

# Payoff Statement



## EAST WEST BANK

Baby Lulu, Inc.

Date: May 12, 2010  
Loan No.: 3001535-20001  
Borrower: Baby Lulu, Inc.  
Property: UCC

☎  
Attn:  
Escrow No.

This demand is being sent in response to your request for a payoff statement. There is to be no expense to the bank in connection with this transaction. We reserve the right to amend or withdraw this demand at any time.

**Account Information:**

Principal Balance	\$0.00
Interest to	\$0.00
Statement Fee	\$0.00
Fax Fee	\$0.00
Full Reconveyance	\$0.00
UCC Termination Fee	\$0.00
Recording Fee	\$0.00
<b>Amount to pay loan in full</b>	<b>\$0.00</b>

**PLEASE CALL ON THE DAY OF PAYOFF TO RECEIVE AN ACCURATE PAYOFF QUOTE. QUOTES MAY CHANGE DUE TO RATE CHANGES, PREPAYMENT PENALTY UPDATES, AND/OR PAYMENTS OR ADVANCES THAT HAVE BEEN APPLIED.**

Funds received after 5/12/10 will require an additional **\$0.00** interest per day. **Funds must be in our office by 1:00 P.M. or interest will be charged through the next business day.** Any discrepancy between your calculation and ours may result in the accrual of additional interest. **Please remit funds by WIRE TRANSFER and credit to our ABA No. 322070381 (Attention: Linda Lam), referencing the loan number.** Issuance of this statement does not suspend the contract requirement to make the mortgage payments when due.

A late charge of **\$N/A** will be assessed **11 days** after a current payment is due and should be added to the payoff total if received after that time.

\*\*\*This account has been paid in full as of September 02, 2008 \*\*\*

**PLEASE NOTE THE FOLLOWING:**

- Interest paid to N/A.
- The statement fee is due whether or not your escrow closes.
- This statement will be void after N/A.
- There is a **\$15.00** charge for each amended demand issued.
- Please hold \$N/A until N/A pending clearance of customer's check.

The **UCC Termination** Recorded 10/29/2008 #0871769446.

Francine Medina  
Loan Service Department  
Tel: (626) 371-88701  
Fax: (626) 927-2088