

U.S. DEPARTMENT OF COMMERCE

RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

Patent and Trademark Office  
Docket No. 0742700481

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

1. Name of conveying party(ies):  
**SANWA BANK CALIFORNIA**  
 (now known as United California Bank)

Individual(s)       Association  
 General Partnership       Limited Partnership  
 Corporation-State:  Other: **CALIFORNIA BANKING CORPORATION**

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

2. Name and address of receiving party(ies):

Name: **ENCAD, INC.**  
 Internal Address:  
 Street Address: **6059 CORNERSTONE COURT WEST**  
 City: **SAN DIEGO** State: **CALIFORNIA** ZIP: **92121**

Individual(s) citizenship: \_\_\_\_\_  
 Association: \_\_\_\_\_  
 General Partnership: \_\_\_\_\_  
 Limited Partnership: \_\_\_\_\_  
 Corporation-State: **CALIFORNIA**  
 Other: \_\_\_\_\_

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

3. Nature of conveyance:

Assignment       Merger  
 Security Agreement       Change of Name  
 Other: **RELEASE OF SECURITY INTEREST**

Execution Date: **SEPTEMBER 27, 2001**

4.A. Trademark Application No.(s)	B. Registration No.(s)
	2,170,194      1,702,418
	1,320,138      1,752,362
	1,285,051      1,965,973
	1,286,909
	2,308,485
	1,479,468

Additional numbers attached? \* Yes  No

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

**CHARLOTTE Y. CHEN**  
**MORRISON & FOERSTER LLP**  
**555 WEST FIFTH STREET**  
**SUITE 3500**  
**LOS ANGELES, CALIFORNIA 90013-1024**

6. Total number of applications and trademark registrations involved: 9

7. Total fee (37 C.F.R. § 3.41): \$240.00

Enclosed  
 Authorized to be charged to deposit account, referencing Attorney Docket **0742700481**

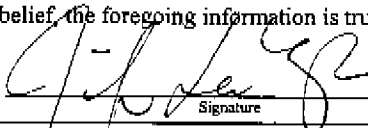
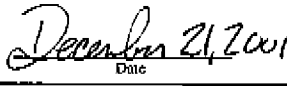
8. Deposit account number: **03-1952**

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. § 1.21 which may be required by this paper, or to credit any overpayment to Deposit Account No. 03-1952.

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.

Name: **Jennifer Lee Taylor**            

Signature      Date

Total number of pages comprising cover sheet, attachments and document: 4

Mail documents to be recorded with required cover sheet information to:  
Commissioner of Patents and Trademarks  
Box Assignments  
Washington, D.C. 20231



### UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

N-0000-058-2

**CL@S**  
INFORMATION SERVICES

www.cl@info.com  
1415 NIVEL PARK DRIVE, SUITE 116  
SACRAMENTO, CA 95812-4300  
TEL: 916.479.0100 / 916.552.2000  
FAX: 916.552.2999

bank

serial number 5071

FILED  
SACRAMENTO, CA  
OCT 12, 2001 AT 1544  
BILL JONES  
SECRETARY OF STATE

THE AL

1a. INITIAL FINANCING STATEMENT FILE # 0012880480

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  **ASSIGNMENT (all or part):** Give name of assignee in Item 7a or 7b and address of assignee in Item 7c and also give name of assignor in Item 8.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.  
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  
 **CHANGE** name and/or address: Give current record name in Item 6a or 6b; also give new name (if name changed) in Item 7a or 7b and/or new address (if address changed in Item 7c).  
 **DELETE** name: Give record name to be deleted in Item 6a or 6b.  
 **ADD** name: Complete Item 7a or 7b, and also Item 7c; also complete items 7d-7g (if applicable).

#### 6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME  
Encsd, Inc.

OR

6b. INDIVIDUAL'S LAST NAME  
FIRST NAME  
MIDDLE NAME  
SUFFIX

#### 7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME  
FIRST NAME  
MIDDLE NAME  
SUFFIX

7c. MAILING ADDRESS  
CITY  
STATE  
CA  
POSTAL CODE  
COUNTRY  
USA

7d. TAX ID # ESN OR EIN  
ADD'L INFO RE ORGANIZATION DEBTOR

7e. TYPE OF ORGANIZATION  
DEBTOR

7f. JURISDICTION OF ORGANIZATION

7g. ORGANIZATIONAL ID #, if any  
 NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.  
Describe collateral  deleted or  added, or give entire  revised collateral description, or describe collateral  assigned.

**ACKNOWLEDGMENT  
COPY**

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which sells collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here  and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME  
United California Bank formerly known as Sanwa Bank California

OR

9b. INDIVIDUAL'S LAST NAME  
FIRST NAME  
MIDDLE NAME  
SUFFIX

10. OPTIONAL FILER REFERENCE DATA  
San Diego CBC 0157850488 State of California

80721650

THE ORIGINAL OF THIS DOCUMENT  
WAS RECORDED ON OCT 16, 2001  
DOCUMENT NUMBER 2001-0748845  
GREGORY J. SMITH, COUNTY RECORDER  
SAN DIEGO COUNTY RECORDER'S OFFICE  
TIME: 3:20 PM

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

United California Bank formerly known as Sanwa Bank  
California  
Documentation Center (South)  
300 South Grand Avenue, Fifth Floor  
Los Angeles, California 90071

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 2000-0233665

1b. THIS FINANCING STATEMENT AMENDMENT IS (to be filed for record) (or recorded) in the REAL ESTATE RECORDS.

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  **ASSIGNMENT (all or part):** Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 6.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

**CHANGE name and/or address:** Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.

**DELETE name:** Give record name to be deleted in item 6a or 6b.

**ADD name:** Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX
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7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX
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7c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
	CA		USA

7d. TAX ID #: SSN OR EIN

7e. TYPE OF ORGANIZATION

7f. JURISDICTION OF ORGANIZATION

7g. ORGANIZATIONAL ID #, if any  NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.

Describe collateral  deleted or  added, or give entire  revised collateral description, or describe collateral  assigned.

**ACKNOWLEDGMENT COPY**

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment; if this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here  and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA**

San Diego CBC 01579650488 County of San Diego

8072650

FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

**ACKNOWLEDGMENT COPY**