Form PTO-1594 (Rev. 07/05) OMB Collection 0651-0027 (exp. 6/30/2008)	U.S. DEPARTMENT OF COMMERC United States Patent and Trademark Office
RECORDATION FORM COVER SHEET TRADEMARKS ONLY	
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): Rene Clement	2. Name and address of receiving party(ies) Additional names, addresses, or citizenship attached? No Name: 4356209 Canada Inc.
X Individual(s) ☐ Association ☐ General Partnership ☐ Limited Partnership ☐ Corporation- State: ☐ ☐ Other ☐ Citizenship (see guidelines) Canada Additional names of conveying parties attached? ☐ Yes ☒ No.	Internal Address: Street Address: 1417 C Cyrville Road, #203 City: 0ttawa State: Ontario Country: Canada Zip: K1B 3L7 Association Citizenship
3. Nature of conveyance)/Execution Date(s): Execution Date(s) 07/06/2006 X Assignment Merger Security Agreement Change of Name Other	General Partnership Citizenship Limited Partnership Citizenship X Corporation Citizenship Canada Other Citizenship 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)
4. Application number(s) or registration number(s) and A. Trademark Application No.(s) 78/854,637 C. Identification or Description of Trademark(s) (and Filing)	B. Trademark Registration No.(s) Additional sheet(s) attached? Yes No
5. Name & address of party to whom correspondence concerning document should be mailed: Name: James C. Wray	6. Total number of applications and registrations involved:
Internal Address: Street Address: 1493 Chain Bridge Road, Suite 300	7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$\frac{40}{\text{\$\sum}\$} Authorized to be charged by credit card \$\text{\$\sum\$} Authorized to be charged to deposit account} \$\text{\$\sum\$} Enclosed
City: McLean State: VA Zip: 22101 Phone Number: 703-442-4800 Fax Number: 703-448-7397 Email Address: jcwray@starpower.net	8. Payment Information: a. Credit Card Last 4 Numbers 3619 Expiration Date 05/07 b. Deposit Account Number
9. Signature: WIH Gand Signature Julie H. Gamoti	
Name of Person Signing	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 1450, Alexandria, VA 22313-1450

TRADEMARK REEL: 003392 FRAME: 0249 FAX No. 6132305168

ASSIGNMENT

WHEREAS, Rene Clement, whose full postal office address is 667 Arc-en-Clel, Orleans, Ontario K4A 3H8, Canada, is the owner of the trade marks listed on the attached Schedule A.

WHEREAS, 4356209 Canada Inc., whose full post office address is 1417 C Cyrville Rd. #203, Ottawa, Ontario KIB 3L7, Canada, is desirous of acquiring all right, title, and interest in and to the trade marks, together with the goodwill of business in connection with which said trade marks are used in the United States of America and which is symbolized by said trade marks.

NOW, THERBFORE, for good and valuable consideration, receipt of which is hereby acknowledged, Rene Clement does hereby assign unto 4356209 Canada Inc. all his right, title, and interest in and to the said trade marks, together with the goodwill of the business in connection with which said trade marks are used in the United States of America and which is symbolized by gaid trade marks.

Executed this ______ day of _______

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SCHEDULE "A"

SERIAL NO. FILING DATE TRADE MARK OUR FILE NO.

78854637 April 5, 2006 ALLIANCE (DESIGN) TM 20576-25

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