



State of Illinois Trademark or Servicemark Assignment Application

**This space for use by
Secretary of State.**

TM/SM-35a

**Mailing Address:
Secretary of State
Department of Business Services
Trademark Division
Rm. 330 Howlett Building
Springfield, IL 62756**

**217-524-0400
www.cyberdriveillinois.com**

**Application must be typed or legibly printed in black ink.
Assignment of Registration must be on form provided by
the Secretary of State.

A \$5 assignment fee is required in the form of a
check or money order payable to
Illinois Secretary of State.

See instruction page for additional information.**

WHEREAS:

1. Name of Registrant/Owner of the Mark: _____

Assignor
2. Business Address: _____

Street

City, State, ZIP Code
3. Present Owner is a (check one):
 Corporation Union General Partnership Limited Liability Partnership (LLP)
 Individual Association Limited Partnership (LP) Limited Liability Company (LLC)
 Other (specify): _____
4. a) If a Corporation, LP, LLP or LLC, State in which it is Organized: _____
 b) If an LP or LLP, Name of one of the General Partners: _____
5. Has adopted and used the Mark: _____

Name of Trademark or Servicemark

 which is registered under number _ _ _ - _ _ _ as of _____

Original Registration Date (Month, Day, Year)

 in the Office of the Illinois Secretary of State.

NOW, THEREFORE, to all whom it may concern:

Be it known that for good and valuable consideration, the receipt of which is hereby acknowledged, said owner has sold, assigned and transferred the registered mark, and by these presents does sell, assign and transfer unto:

6. Name of New Registrant: _____

Assignee
7. Business Address: _____

Street

City, State, ZIP Code
8. New Owner is a (check one):
 Corporation Union General Partnership Limited Liability Partnership (LLP)
 Individual Association Limited Partnership (LP) Limited Liability Company (LLC)
 Other (specify): _____
9. a) If a Corporation, LP, LLP or LLC, State in which it is Organized: _____
 b) If an LP or LLP, Name of one of the General Partners: _____

10. The entire right, title and interest in and to the said _____
Name of Trademark or Servicemark

and the registration thereof, together with the goodwill of the business in connection with which the said mark is used, or with that part of the goodwill of the business connected with.

The undersigned hereby affirms, under penalties of perjury, that the facts stated herein are true.

X _____
Signature of Assignor (Old Owner) Name of Assignor (type or print)

Official Capacity Contact Phone Number

Instructions for Completing Assignment Application

1. Provide the name of the registrant/owner of the mark as it currently appears on the records of the Secretary of State's office.
2. Provide the complete address as it currently appears on the records of the Secretary of State's office.
3. Mark the appropriate box for the type of ownership; i.e., if the registrant indicated in item 1 is an Individual, item 3 should be marked Individual.
4. Complete item 4a or 4b only if the registrant is one of the business entities listed in item 3.
5. Provide the name of the mark, registration number and the original date of registration.
6. Provide the name of the new registrant as it should appear after the recording of this document.
7. Provide the address of the new registrant as it should appear after the recording of this document.

Signature and Contact Information

The registrant or the attorney-in-fact for the registrant must sign the form. The capacity in which the person is signing must be provided (i.e., registrant, officer, attorney-in-fact). Photocopied, stamped or faxed signatures are unacceptable.

Duration

A certificate indicating the assignment of ownership may be issued for the remainder of the current term of the mark. An assignment of any registration under this Act shall be void as against any subsequent purchaser for valuable consideration without notice unless is it recorded with the Secretary of State's office within three months after the date thereof or prior to such subsequent purchase.