

AO 440 (Rev. 12/09) Summons in a Civil Action

## UNITED STATES DISTRICT COURT

for the  
Eastern District of Texas

PARALLEL NETWORKS, LLC

*Plaintiff*

v.

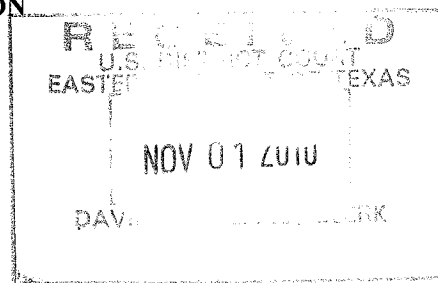
ADIDAS AMERICA, INC., et al.

*Defendant*

Civil Action No. 6:10-cv-00491

## SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Kodak Imaging Network, Inc.  
 c/o The Corporation Trust Company  
 Corporation Trust Center  
 1209 Orange Street  
 Wilmington, DE 19801



A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Craig Tadlock  
 Tadlock Law Firm PLLC  
 400 E. Royal Lane, Suite 290  
 Irving, Texas 75039  
 Telephone: (214) 785-6014  
 Email: craig@tadlocklawfirm.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 9/28/10

CLERK OF COURT

Signature of Clerk or Deputy Clerk

Civil Action No. 6:10-cv-00491

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Kodak Imaging Network, Inc.  
was received by me on *(date)* 09/28/2010 .

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_ , and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_ , who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

☐ I returned the summons unexecuted because \_\_\_\_\_ ; or

☒ Other *(specify)*: Delivered via Certified Mail (see attached) on 10/4/2010 .

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: 10/14/2010

/s/Timothy Willette  
*Server's signature*

Timothy Willette, Legal Assistant  
*Printed name and title*

Bosy & Bennett  
300 N. LaSalle Street, 49th Floor  
Chicago, IL 60654  
*Server's address*

Additional information regarding attempted service, etc:

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kodak Imaging Network, Inc.  
c/o The Corporation Trust Company  
Corporation Trust Center  
1209 Orange Street  
Wilmington, DE 19801

2. Article Number  
(Transfer from service label)

7009 1410 0002 1323 2069

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

☐ Addressee

B. Receiver's (Printed Name)

OCT 04 2010

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service

**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

WILMINGTON, DE 19801

Postage	\$	\$7.50
Certified Fee		\$2.80
Return Receipt Fee (Endorsement Required)		\$2.30
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$12.60



09/29/2010

Sent To

Kodak Imaging Network, Inc.  
c/o The Corporation Trust Company  
Corporation Trust Center  
1209 Orange Street  
Wilmington, DE 19801

PS Form 3811

ons

6902 E2ET 2000 DT410 0002 1323 2069

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## Track & Confirm

### Search Results

Label/Receipt Number: **7009 1410 0002 1323 2069**Expected Delivery Date: **October 1, 2010**Class: **Priority Mail®**Service(s): **Certified Mail™****Return Receipt**Status: **Delivered**

Your item was delivered at 7:10 am on October 04, 2010 in  
WILMINGTON, DE 19801.

#### Detailed Results:

- **Delivered, October 04, 2010, 7:10 am, WILMINGTON, DE 19801**
- **Arrival at Unit, October 01, 2010, 10:40 am, WILMINGTON, DE 19801**
- **Acceptance, September 29, 2010, 12:02 pm, CHICAGO, IL 60654**

### Notification Options

#### Track & Confirm by email

Get current event information or updates for your item sent to you or others by email.

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No FEAR Act EEO Data

FOIA

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