

05-14-1999

FORM PTO-1595
(Rev. 6-93)

RECORDATION FORM



DEPARTMENT OF COMMERCE
Patent and Trademark Office

101037292

TRADEMARKS ONLY

OMB No. 0651-0011 (exp. 4/94)

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

<p>1. Name of conveying party(ies): Northern Hydraulics, Inc.</p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation - State Minnesota <input type="checkbox"/> Other</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: Northern Tool & Equipment Company, Inc.</p> <p>Internal Address:</p> <p>Street Address: 2800 Southcross Drive West</p> <p>City: Burnsville State: MN ZIP: 55337</p> <p><input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation - State Minnesota <input type="checkbox"/> Other</p>
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<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other</p> <p>Execution Date(s): 8/20/98</p>	<p>If assignee is not domiciled in the United States, a domestic representative designation is attached. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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<p>4. Application number(s) or trademark number(s):</p> <p>A. Trademark Application No(s).</p>	<p>B. Trademark No(s)</p> <p>1,209,869 1,241,289</p> <p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: Barbara J. Grahn Internal Address: 3400 Plaza VII Building Street Address: 45 South Seventh Street City: Minneapolis State: MN ZIP: 55402 Our File No.: 12908/212 and 213</p>	<p>6. Total number of applications and registrations involved: 2</p> <p>7. Total Fee (37 CFR 3.41) \$65.00. <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account <input checked="" type="checkbox"/> Authorized to charge any underpayment or credit any overpayment to deposit account.</p> <p>8. Deposit account number: 15-0627 (Attach duplicate copy of this page if paying by deposit account.)</p>
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01 FC:481 40.00 OP
 02 FC:482 25.00 OP

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.

Barbara J. Grahn 5/7/99
 Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments, and document: 2

Mail documents to be recorded with required cover sheet information to:
 U.S. Patent and Trademark Office, Office of Public Records, Crystal Gateway 4, Room 335
 Washington, D.C. 20231

State of Minnesota

SECRETARY OF STATE

Certificate of Name Change

I, Joan Anderson Grove, Secretary of State of Minnesota, do certify that the corporation listed below filed an amendment of its articles of incorporation, or, in the case of a non-Minnesota corporation, a certificate of name change, changing its name with this office on the date listed below, and that the corporation has complied with the relevant laws of Minnesota with respect to that filing.

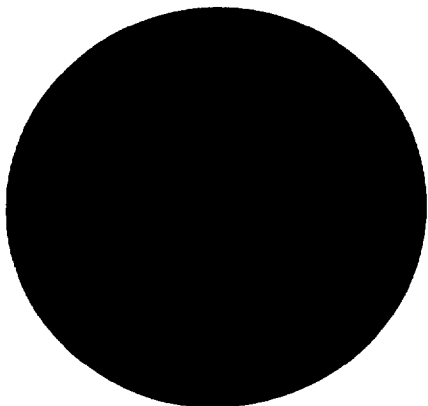
Old Name: Northern Hydraulics, Inc.

New Name: Northern Tool & Equipment Company, Inc.

State of Incorporation: MN

Date Amendment filed: 07/22/1998

This certificate has been issued on 08/20/98.



Joan Anderson Grove
Secretary of State.