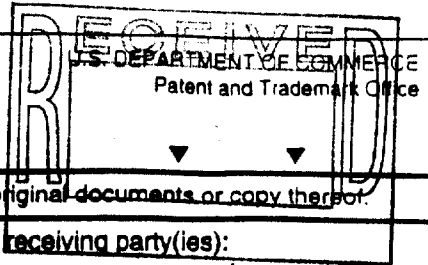


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To the Honorable Commissioner of Patent

101101635

Send original documents or copy thereof.

1. Name of conveying party(ies):

CU Services Corp.

*MLO  
7-26-99*

- Individual(s)
- General Partnership
- Corporation-State MN
- Other
- Association
- Limited Partnership

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

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

Name: XP Systems Corporation

Internal Address: Suite 300

Street Address: 7900 Glenroy Road

City: Bloomington State: MN ZIP: 55439

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership
- Corporation-State MN
- Other

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)

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

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other Re-record to correct conveying party name previously recorded at Reel
- Merger
- Change of Name

Execution Date: 1429 Frame 0204 8/16/95

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

B. Trademark registration No.(s)

1581202

Additional numbers attached?  Yes  No

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

Name: Barbara A. Leininger

Internal Address: Leininger & Associates

Street Address: 1710 E. Old Shakopee Road

City: Bloomington State: MN ZIP: 55425

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

1

7. Total fee (37 CFR 3.41):..... \$ 40.00

Enclosed

Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

07/27/1999 DWGUYEN 00000295 1581202

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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 A. Leininger  
Name of Person Signing

Barbara A. Leininger  
Signature

7/28/99  
Date

Total number of pages comprising cover sheet:  

TRADEMARK

FORM PTO-1594 (Rev. 6-93)

OMB No. 0851-0011 (exp. 10-31-95)

FEB - 7 1996 EC

02-15-1996

FEET

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

40.00 481



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To the Honorable Commissioner of Pat.

100135042

Send original documents or copy thereof.

1. Name of conveying party(ies):

XP Systems Corporation

- Individual(s)
- General Partnership
- Corporation-State (MN)
- Other

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

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other
- Association
- Limited Partnership
- Merger
- Change of Name

Execution Date: 8/16/1995

2. Name and address of receiving party(ies)

Name: XP Systems Corporation

Internal Address:

Street Address: 7803 Glenroy Road #300

City: Bloomington State: MN ZIP: 55439

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership
- Corporation-State Minnesota
- Other

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)

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

4. Application number(s) or patent number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

1581202

Additional numbers attached?  Yes  No

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

Name: Tricia Carragher

Internal Address: Leininger & Associates Suite 158

Street Address: 7900 International Dr.

City: Bloomington State: MN ZIP: 55425

6. Total number of applications and registrations involved:



7. Total fee (37 CFR 3.41).....\$ 40.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

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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.

Tricia Carragher  
Name of Person Signing

Tricia Carragher  
Signature

2/1/96  
Date

Total number of pages including cover sheet, attachments, and document: 3

Mail documents to be recorded with required cover sheet information to:  
Commissioner of Patents & Trademarks, Box Assignments  
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.

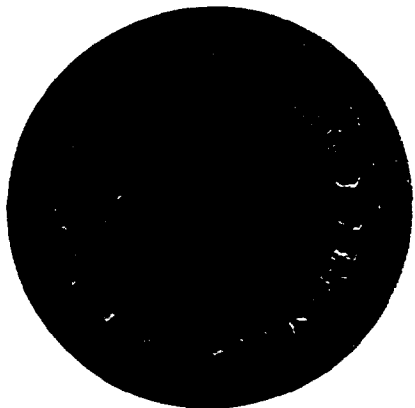
Old Name: C U Services Corp.

New Name: XP Systems Corporation

State of Incorporation: MN

Date Amendment filed: 08/16/1995

This certificate has been issued on 09/28/95.



*Joan Anderson Grove*  
Secretary of State.