

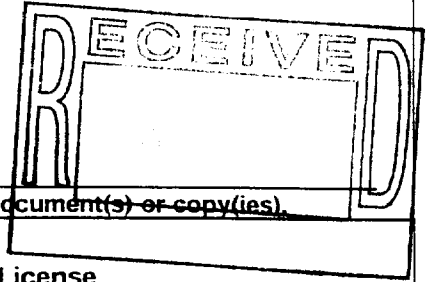
08-05-1999

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RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY



TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

New

Resubmission (Non-Recordation)  
Document ID #

Correction of PTO Error  
Reel #  Frame #

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Reel #  Frame #

Conveyance Type

Assignment  License

Security Agreement  Nunc Pro Tunc Assignment

Merger

Change of Name

Other

Effective Date  
Month Day Year

Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/KA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Individual  General Partnership  Limited Partnership

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

FOR OFFICE USE ONLY

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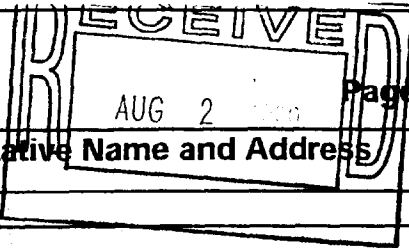
01 FC:481

40.00 OP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

REEL: 001945 FRAME: 0539



**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

**Registration Number(s)**

**Number of Properties**

Enter the total number of properties involved.

#

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

No

**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. Charges to deposit account are authorized, as indicated herein.

SCOTT S. HAVLICK

Name of Person Signing

Signature

A0ABTEI 05500000

EIGHTH FEB 14 01 80

20 00.00

August 2, 1999

Date Signed

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12-29-98

F.

01-05-1999

SHEET

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

CMB No. 3651-2011 (Rev. 4/94)



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Tab settings == ==

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attached original documents or copy thereof.

To the Honorable Commissioner of

1. Name of conveying party(ies):  
NDPS Acquisition, Inc.  
National Data Plaza  
Atlanta, Georgia 30329

MRD 12-29-98

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

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

2. Name and address of receiving party(ies)  
Name: CheckRite Recovery Services, Inc.

Internal Address:  
Street Address: National Data Plaza  
City: Atlanta State: GA ZIP: 30329

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

If assignee is not domiciled in the United States, a domestic representative design 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
  - Merger
  - Change of Name

Execution Date: March 11, 1998

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

A. Trademark Application No.(s)  
75/337,382

B. Trademark Registration No.(s)  
1,116,177; 1,373,404; 2,100,504

Additional numbers attached?  Yes  No

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

Name: Scott S. Havlick, Esq.

Internal Address:

Street Address: Holland & Hart, LLP

1050 Walnut Street, Suite 500

City: Boulder State: CO ZIP: 80302

6. Total number of applications and registrations involved: 4

7. Total fee (37 CFR 3.41).....\$ 115.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

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

01/05/1999 INGVEN 00000003 1116177  
01 FC:401 40.00 OP  
02 FC:402 75.00 OP

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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.

Scott S. Havlick, Esq.  
Name of Person Signing

Signature

12/29/98  
Date

5

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

Mail documents to be recorded with required cover sheet information to:  
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TRADEMARK  
REEL: 001945 FRAME: 0541

**Secretary of State  
Corporations Division  
Suite 315, West Tower  
2 Martin Luther King Jr. Dr.  
Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 980840346  
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EFFECTIVE DATE: 03/19/1998  
REFERENCE : 0048  
PRINT DATE : 03/25/1998  
FORM NUMBER : 611

TRACY L. KING  
POWELL, GOLDSTEIN, FRAZER & MURPHY  
191 PEACHTREE ST., N.E., 16TH FLOOR  
ATLANTA GA 30303

**CERTIFICATE OF NAME CHANGE AMENDMENT**

I, Lewis A. Massey, the Secretary of State and the Corporation Commissioner of the State of Georgia, do hereby certify under the seal of my office that

**NDPS ACQUISITION, INC.  
A DOMESTIC PROFIT CORPORATION**

has filed articles of amendment in the office of the Secretary of State changing its name to

**CHECKRITE RECOVERY SERVICES, INC.**

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.

*Lewis A. Massey*  
LEWIS A. MASSEY  
SECRETARY OF STATE



**ARTICLES OF AMENDMENT  
TO THE  
ARTICLES OF INCORPORATION  
OF  
NDPS ACQUISITION, INC.**

1. The name of the corporation is NDPS ACQUISITION, INC.

(hereinafter the "Corporation").

2. The Articles of Incorporation of the Corporation are hereby amended by deleting Article I. in its entirety and substituting the following in lieu thereof:

"I.

The name of the corporation is:

CheckRite Recovery Services, Inc."


3. All other provisions of the Articles of Incorporation shall remain in full force and effect.

4. This amendment to the Articles of Incorporation was duly adopted by a unanimous written consent of the Board of Directors of the Corporation dated March 11, 1998.

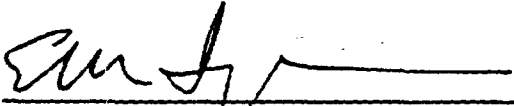
5. Pursuant to Section 14-2-1002(6) of the Georgia Business Corporation Code, shareholder approval is not required for such an amendment.

IN WITNESS WHEREOF, the undersigned does hereby set his hand effective this 11<sup>th</sup> day  
of March, 1998.

NDPS ACQUISITION, INC.

By:   
Michael Egan, President

ATTEST:

  
E. Michael Ingram, Secretary

::ODMA\PCDOCS\ATL\199218\1  
D07956.0004

SECRETARY OF STATE

MAR 19 2 01 PM '98

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