

11-17-1999



101202416

U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

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RECORDATION FORM COVER SHEET
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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 #
- Corrective Document
Reel # Frame #

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
Effective Date
Month Day Year
- Merger
- Change of Name
- Other

Conveying Party

Mark if additional names of conveying parties attached

Name

Execution Date
Month Day Year

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/AKA/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

11/16/1999 DECATES 00000084 75696665

01 FC:481
02 FC:482

40.00 OF
275.00 OF

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

TRADEMARK
REEL: 001989 FRAME: 0004

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)

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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)

<input type="text" value="75696665"/>	<input type="text" value="75696664"/>	<input type="text" value="75696663"/>	<input type="text" value="2128825"/>	<input type="text" value="2128817"/>	<input type="text" value="2085741"/>
<input type="text" value="75600124"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2085740"/>	<input type="text" value="1149279"/>	<input type="text" value="851730"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="830475"/>	<input type="text" value="754871"/>	<input type="text"/>

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

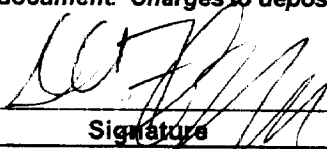
No

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.

David A. Flanigan, Jr.

Name of Person Signing



Signature

11/09/1999

Date Signed

Secretary of State

Corporations Section

James K. Polk Building, Suite 1800

Nashville, Tennessee 37243-0306

ISSUANCE DATE: 11/04/1999
REQUEST NUMBER: 99308134

CHARTER/QUALIFICATION DATE: 08/30/1957
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0003134
JURISDICTION: TENNESSEE

TO:
CAPITAL FILING SERVICE, INC.
7051 HIGHWAY 70 SO.
NO. 333
NASHVILLE, TN 37221

REQUESTED BY:
CAPITAL FILING SERVICE, INC.
7051 HIGHWAY 70 SO.
NO. 333
NASHVILLE, TN 37221

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"PEACHTREE DOORS AND WINDOWS INC."

WAS INCORPORATED OR QUALIFIED TO DO BUSINESS IN THE STATE OF TENNESSEE ON THE ABOVE DATE, AND THAT THE ATTACHED DOCUMENT(S) WAS/WERE FILED IN OFFICE ON THE DATE(S) AS BELOW INDICATED:

REFERENCE NUMBER	DATE FILED	FILING TYPE	FILING ACTION									
			NAM	DUR	STK	PRN	OPC	AGP	INC	MAL	MYC	
BV53P0414	08/30/1957	CHART-PROFIT										
108-00717	11/15/1979	AMEND-CHARTER					X					
1904-0843	08/27/1990	AMEND-CHARTER					X	X				
2826-0052	03/31/1994	AMEND-CHARTER	X									
3089-1374	12/21/1995	MERGER										
3115-0541	02/08/1996	ASSUMED-ADD										
3667-0288	04/08/1999	ASSUMED-CANCEL										
3676-1221	04/27/1999	AMEND-CHARTER	X									

FOR: REQUEST FOR COPIES

ON DATE: 11/04/99

FEEES

FROM:
CAPITAL FILING SERVICE, INC.
7051 HWY 70 S
#333
NASHVILLE, TN 37221-0000

RECEIVED: \$240.00 \$0.00
TOTAL PAYMENT RECEIVED: \$240.00

RECEIPT NUMBER: 00002568400
ACCOUNT NUMBER: 00101230



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE

TRADEMARK
REEL: 001989 FRAME: 0006

ARTICLES OF AMENDMENT TO THE CHARTER

3 15 1999 11 12 1999

CORPORATE CONTROL NUMBER (IF KNOWN) 0003134

PURSUANT TO THE PROVISIONS OF SECTION 48-20-106 OF THE TENNESSEE BUSINESS CORPORATION ACT, THE UNDERSIGNED CORPORATION ADOPTS THE FOLLOWING ARTICLES OF AMENDMENT TO ITS CHARTER:

PLEASE MARK THE BLOCK THAT APPLIES:

AMENDMENT IS TO BE EFFECTIVE WHEN FILED BY THE SECRETARY OF STATE.

AMENDMENT IS TO BE EFFECTIVE, _____ MONTH _____ DAY _____ YEAR

(NOT TO BE LATER THAN THE 90TH DAY AFTER THE DATE THIS DOCUMENT IS FILED.) IF NEITHER BLOCK IS CHECKED, THE AMENDMENT WILL BE EFFECTIVE AT THE TIME OF FILING.

1. PLEASE INSERT THE NAME OF THE CORPORATION AS IT APPEARS ON RECORD: _____

Caradon Doors and Windows Inc.

IF CHANGING THE NAME, INSERT THE NEW NAME ON THE LINE BELOW:

Peachtree Doors and Windows Inc.

2. PLEASE INSERT ANY CHANGES THAT APPLY:

A. PRINCIPAL ADDRESS: (street) _____

(city) _____ (state) _____ (zip code) _____

B. REGISTERED AGENT: _____

C. REGISTERED ADDRESS: (street) _____

(city) _____ (state) TN (zip code) _____ (county) _____

D. OTHER CHANGES:

3. THE CORPORATION IS FOR PROFIT.

4. THE MANNER (IF NOT SET FORTH IN THE AMENDMENT) FOR IMPLEMENTATION OF ANY EXCHANGE, RECLASSIFICATION, OR CANCELLATION OF ISSUED SHARES IS AS FOLLOWS:

5. THE AMENDMENT WAS DULY ADOPTED ON April 20, 1999 BY: _____
MONTH DAY YEAR

(NOTE: PLEASE MARK THE BLOCK THAT APPLIES)

THE INCORPORATORS.

THE BOARD OF DIRECTORS WITHOUT SHAREHOLDER APPROVAL, AS SUCH WAS NOT REQUIRED.

THE SHAREHOLDERS.

Vice President

SIGNER'S CAPACITY


SIGNATURE

Robert B. Leckie

NAME OF SIGNER (TYPED OR PRINTED)



SS-4421 (Rev. 12/93)

RDA 1678