

08-02-2000

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office



BT

6.26.00

101420609

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

1. Name of conveying party(ies):  
 ENTITY SYSTEMS, INC.

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

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

3. Nature of conveyance:

Assignment                               Merger  
 Security Agreement                   Change of Name  
 Other

Execution Date: October 7, 1999

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

Name: ALIBRE, INC.

Internal Address: \_\_\_\_\_

Street Address: 1701 N. Greenville, Suite 702

City: Richardson State Texas ZIP: 75081

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation-State Delaware  
 Other \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  
 Yes                       No  
 (Designation must be a separate document from Assignment)  
 Additional name(s) & address(es) attached?  Yes  No

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

A. Trademark Application No.(s)

75/588,045  
75/733,401  
75/733,402  
75/794,915  
75/794,925  
75/796,371  
75/797,455

B. Trademark registration No.(s)

Additional numbers attached?  Yes  No

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

Name: J. Kevin Gray  
Jenkins & Gilchrist, P.C.  
 Internal Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address: 1445 Ross Avenue, Ste. 3200  
 \_\_\_\_\_  
 City: Dallas State: Texas Zip: 75202-2799

6. Total number of applications and registrations involved: 7

7. Total fee (37 CFR 3.41): \$ 190.00 E

Enclosed  
 Authorized to be charged to deposit account.

(If check is not received with this correspondence or additional fees are required, please charge to deposit account 10-0447.)

8. Deposit Account number: \_\_\_\_\_  
 (Attach duplicate copy of this page if paying by deposit account)

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.

08/01/2000 NTMA11 00000326 75588045

FC:461 40.00 OP  
 FE:461 150.00 OP

Name of Person Signing

Signature

6/22/00

Date

Total number of pages comprising cover sheet: 3

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ENTITY SYSTEMS, INC.", CHANGING ITS NAME FROM "ENTITY SYSTEMS, INC." TO "ALIBRE, INC.", FILED IN THIS OFFICE ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 1999, AT 1 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE SUSSEX COUNTY RECORDER OF DEEDS.



*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION:

10-27-99

DATE: