

09-19-2000



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AUG 28 2000

TRADEMARKS ONLY

*MP 8.28.00*

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

<p>1. Name of conveying party(ies): Pacmark Corporation</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 Incorporated <u>Oregon</u>  <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: <u>Coastwide Laboratories, Inc.</u></p> <p>Internal Address: <u>P.O. Box 12107</u></p> <p>Street Address: <u>1836 N.E. 7<sup>th</sup> Avenue</u></p> <p>City <u>Portland</u> State <u>Oregon</u> ZIP <u>97212</u></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 Incorporated <u>Oregon</u>  <input type="checkbox"/> Other</p> <p>If assignee is not domiciled in the U.S., a domestic representative designation attached: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>  <small>(Designation must be a separate document from assignment)</small></p> <p>Additional name(s) &amp; address(es) attached?  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<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: <u>July 10, 1998</u></p>	
<p>4. Application number(s) or registration number(s):</p> <p>A. Trademark Application No.(s)      B. Trademark Registration No.(s) <u>1,632,821 1,712,586 1,652,812</u></p> <p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Charles D. McClung</u>  Address: <u>Chernoff, Vilhauer, McClung &amp; Stenzel LLP</u>  <u>1600 ODS Tower</u>  <u>601 SW Second Avenue</u>  <u>Portland, Oregon 97204-3157</u></p>	<p>6. Total number of trademark applications and registrations involved: <u>[3]</u></p> <p>7. Total fee (37 CFR 2.6(b)(6))--\$ <u>90.00</u>  <input checked="" type="checkbox"/> Enclosed  <input type="checkbox"/> Authorized to be charged to deposit account  <input checked="" type="checkbox"/> Any deficiencies in enclosed fees authorized to be charged to deposit account</p> <p>8. Deposit Account No. <u>03-1550</u>  <small>(Attach duplicate copy of this page if paying by deposit account)</small></p>
<p><b>DO NOT USE THIS SPACE</b></p>	
<p>9. Statement and signature.</p> <p>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.</p> <p><u>Charles D. McClung</u>      <i>Charles D. McClung</i>      <u>August 22, 2000</u>  Name of Person Signing      Signature      Date</p> <p>Total number of pages comprising cover sheet, attachments, and document <input type="checkbox"/></p>	
<p>09/19/2000 MTHAIL 00000036 1632821</p>	
<p>40.00 OP 50.00 OP</p> <p style="text-align: center;">Do not detach this portion</p>	
<p>Mail documents to be recorded with required cover sheet information to:</p> <p style="text-align: center;">Commissioner of Patents and Trademarks  Box Assignments  Washington, DC 20231</p> <p>Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document and gathering the data needed, and completing and reviewing the sample cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-1000C, Washington, D.C. 20231, and to the Office of Management and Budget, Paperwork Reduction Project, (0651-0011), Washington, D.C. 20503.</p>	

01 FC:481  
02 FC:482

CERTIFICATE

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

I, **BILL BRADBURY**, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

*That the attached copy of the  
Articles of  
Amendment  
filed on  
July 10, 1998*

*for*  
**PACMARK CORPORATION**

*changing the name to*  
**COASTWIDE LABORATORIES, INC.**

*is a true copy of the original document  
that has been filed with this office.*

*In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.*

*BILL BRADBURY, Secretary of State*



By

*Marilyn R. Smith*

Marilyn R. Smith

July 27, 2000



Phone: (503) 986-2200  
Fac: (503) 378-4381  
Secretary of State  
Corporation Division  
255 Capitol St. NE, Suite 151  
Salem, OR 97310-1327

Articles of Amendment—Business/Professional/Nonprofit

- Check the appropriate box below:  
 BUSINESS/PROFESSIONAL CORPORATION  
(Complete only 1, 2, 3, 4, 6, 7)  
 NONPROFIT CORPORATION  
(Complete only 1, 2, 3, 5, 6, 7)

For office use only

FILED

JUL 10 1998

OREGON  
SECRETARY OF STATE

Registry Number: 118378-12

Attach Additional Sheet if Necessary  
Please Type or Print Legibly in Black Ink

- 1) NAME OF CORPORATION PRIOR TO AMENDMENT PACMARK CORPORATION
- 2) STATE THE ARTICLE NUMBER(S) AND SET FORTH THE ARTICLE(S) AS IT IS AMENDED TO READ. (Attach a separate sheet if necessary.)  
Article 1 of the Restated Articles of Incorporation is amended in its entirety to read as follows: The name of the corporation is Coastwide Laboratories, Inc.
- 3) THE AMENDMENT WAS ADOPTED ON: July 9, 1998  
(If more than one amendment was adopted, identify the date of adoption of each amendment.)

BUSINESS/PROFESSIONAL CORPORATION ONLY

4) CHECK THE APPROPRIATE STATEMENT

Shareholder action was required to adopt the amendment(s). The vote was as follows:

Class or series of shares	Number of shares outstanding	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST
Common Stock	1,394,920	1,394,920	1,394,920	0

Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.

The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

NONPROFIT CORPORATION ONLY

5) CHECK THE APPROPRIATE STATEMENT

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required. The membership vote was as follows:

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

6) EXECUTION

Printed Name

W. Grant Watkinson

Signature

Title

President

7) CONTACT NAME

Susan E. Kipper

DAYTIME PHONE NUMBER

503-727-2000

FEEES

Make check for \$10 payable to "Corporation Division."

NOTE: Filing fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

*Handwritten initials and date: 7/10*