

FORM PTO-1618A
Expires 06/30/99
OMB 0651-0027

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

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 #
- Corrective Document
Reel # Frame #

Conveyance Type

- Assignment
 - License
 - Security Agreement
 - Nunc Pro Tunc Assignment
 - Merger
 - Change of Name
 - Other
- Effective Date
Month Day Year
 11 22 2000

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name R.E. Mahmarian Enterprises, LLC

11 01 2000

Formerly

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other Limited Liability Company
- Citizenship/State of Incorporation/Organization California

Receiving Party

Mark if additional names of receiving parties attached

Name Alpha Microsystems, LLC

DBA/AK/A

Composed of

Address (line 1) 2722 Fairview Street

Address (line 2)

Address (line 3) Santa Ana

California

92704

City

State/Country

Zip Code

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other Limited liability company
- Citizenship/State of Incorporation/Organization California

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.)

FOR OFFICE USE ONLY

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 **TRADEMARK**
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

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REEL: 002169 FRAME: 0290

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Expires 06/30/99
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U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

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)

<input type="text"/>	<input type="text"/>	<input type="text"/>
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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.

Michael J. MacDermott

January 2, 2001

Name of Person Signing

Signature

Date Signed

**RECORDATION FORM COVER SHEET
CONTINUATION**

Registration Nos.

1165512
1166282
1171010
1179080
1183551
1193607
1325770
1328168
1328459
1329380
1330638
1342117
1342118
1342514
1342515
1365047
1401996
1432811
1578791
1606246
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1818781
1949336
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2273513

State of California



SECRETARY OF STATE

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of / page(s) was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

NOV 28 2000



Secretary of State



State of California

Bill Jones Secretary of State

FILED
In the office of the Secretary of State
of the State of California

NOV 22 2000

Bill Jones
BILL JONES, Secretary of State

LIMITED LIABILITY COMPANY CERTIFICATE OF AMENDMENT

A \$30.00 filing fee must accompany this form
IMPORTANT - Read instructions before completing this form.

This Space For Filing Use Only

1. Secretary of State File Number:
199936210110

2. Name of Limited Liability Company:
R.E. MAHMARIAN ENTERPRISES, LLC

3. Complete only the sections where information is being changed. Additional pages may be attached if necessary.

A. Limited Liability Company Name (and the name with the words "Limited Liability Company," "Ltd. Liability Co." or the abbreviations "LLC" or "L.L.C.")
ALPHA MICROSYSTEMS, LLC

B. The Limited Liability Company will be managed by (Check One):
 one manager more than one manager single member limited liability company all limited liability company members

C. Amendment to text of the Articles of Organization:

D. Other matters to be included in this certificate may be set forth on separate attached pages and are made a part of this certificate. Other matters may include a change in the latest date on which the limited liability company is to dissolve or any change in the events that will cause the dissolution.

4. Future Effective Date, if any: Month N/A Day Year

5. Number of pages attached, if any: N/A

6. Declaration: It is hereby declared that I am the person who executed this instrument, which execution is my act and deed.

Richard E. Mahmarian
Signature of Authorized Person

Richard E. Mahmarian, Managing Member
Type or Print Name and Title

NOVEMBER 1, 2000
Date

7. RETURN TO:

NAME Ricardo Orozco
FIRM c/o Charles Baclet and Associates, Inc.
ADDRESS 2030 Main Street, Suite 1030
CITY/STATE Irvine, CA
ZIP CODE 92614

