

01-02-2001

FORM PTO 1594
(Rev. 6-93)



COVER SHEET
IS ONLY

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

OMB No. 0651-0011 (exp

101567805

12-12-00

Remarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): Feed-Rite (US) Animal Feeds, Inc.

- Individual(s)
- General Partnership
- Corporation-State
- Other _____

- Association
- Limited Partnership

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

2. Name and address of receiving party(ies)

Name: Hubbard Feeds Inc.

Internal Address: _____

Street Address: 424 N. Riverfront Drive

City: Mankato State: Minnesota ZIP: 56002

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

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No

(Designations must be a separate document from Assignment)

Additional name(s) & address(es) attached Yes No

3. Nature of conveyance:

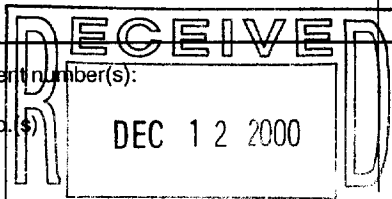
- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

Execution Date: May 22, 1997

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

A. Trademark Application No. (s) _____

B. Trademark Registration No.(s) 1,173,889



Additional numbers attached? Yes No

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

Name: Joshua J. Burke

Internal Address: Dorsey & Whitney LLP

Street Address: 220 South Sixth Street

City: Minneapolis State: MN ZIP 55402

6. Total Number of applications and registrations involved: _____

1

7. Total fee (37 CFR 3.41).....\$ 40.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

04-1420

(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.

Joshua J. Burke
Name of person Signing

Signature

12-8-2000

Date

Total number of pages comprising cover sheet: _____

1

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State of Minnesota

SECRETARY OF STATE

CERTIFICATE OF NAME CHANGE

I, Joan Anderson Grove, Secretary of State of Minnesota, do hereby certify that the corporation listed below filed an amendment of its articles of incorporation, or, in the case of a non-Minnesota corporation, a certificate of name change, changing its name with this office on the date listed below, and that the corporation has complied with the relevant laws of Minnesota with respect to that filing.

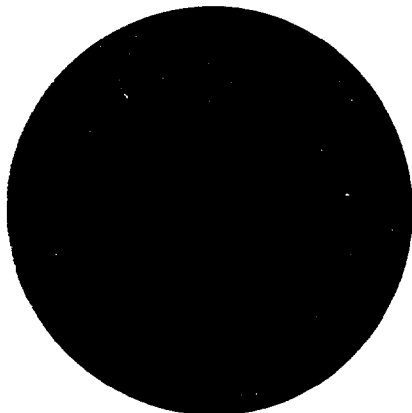
OLD NAME: Feed-Rite (US) Animal Feeds, Inc.

NEW NAME: Hubbard Feeds Inc.

STATE OF FORMATION: Minnesota

DATE AMENDMENT FILED: 5/22/1997

This certificate has been issued on May 22nd, 1997.



Joan Anderson Grove
Secretary of State.