

FORM PTO-1618A
Expires 08/30/99
OMB 0851-0027

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 / 03 / 00

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name Gardner Bender, Inc.

11 / 03 / 00

Formerly _____

- Individual General Partnership Limited Partnership Corporation Association
- Other _____
- Citizenship/State of Incorporation/Organization Wisconsin

Receiving Party

Mark if additional names of receiving parties attached

Name GB Tools and Supplies, Inc.

DBA/AKA/TA _____

Composed of _____

Address (line 1) 6100 North Baker Road

Address (line 2) _____

Address (line 3) Milwaukee Wisconsin 53209
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 Wisconsin

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 (0851-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0851-0027, 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 the Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

700005565

REEL: 002259 FRAME: 0711

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

Page 2

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

<input type="text" value="1293923"/>	<input type="text" value="1365263"/>	<input type="text" value="1365264"/>
<input type="text" value="2269297"/>	<input type="text" value="1167020"/>	<input type="text" value="1393887"/>
<input type="text" value="1384041"/>	<input type="text" value="1901710"/>	<input type="text" value="948151"/>

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.

Robert L. Titley

May 30, 2001

Name of Person Signing

Signature

Date Signed

Quarles & Brady LLP

May 2001

**Gardner Bender, Inc.
Name Change to
GB Tools and Supplies, Inc.**

Registration No.	Mark
1131216	GB
715076	NYLO-FLEX (Stylized)
1881886	PROTECT and Design
1911189	SLIDE KIT and Design
1883379	TAM and Design
1939241	THE FAST WIRING PEOPLE
940930	TRUE TAPE
1987819	TWIN KIT (Stylized)

MKE:4684989.1

**TRADEMARK
REEL: 002259 FRAME: 0713**

DFI/CORP/30
DOCUMENT
2/00

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that the annexed copy has been compared with the document on file in the Corporation Section of the Division of Corporate & Consumer Services of this department, and that the same is a true copy thereof; and that I am the legal custodian of said document, and that this certification is in due form.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department.

RAY ALLEN, Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

DATE: FEB -7 2001

BY: Patricia Weber

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

011604396

RECEIVED

Sec. 180.1006
Wis. Stats. DEC 22 2000 State of Wisconsin
Department of Financial Institutions

WISCONSIN
DEL
ARTICLES OF AMENDMENT - STOCK, FOR-PROFIT CORPORATION

A. The present corporate name (prior to any change effected by this amendment) is:

Gardner Bender, Inc.

Text of Amendment (Refer to the existing articles of incorporation and the instructions on the reverse of this form. Determine those items to be changed and set forth the number identifying the paragraph in the articles of incorporation being changed and how the amended paragraph is to read.)

RESOLVED, THAT the articles of incorporation be amended as follows:

Article I is hereby amended to read in its entirety as follows:

ARTICLE I
NAME

The name of the corporation is GB Tools and Supplies, Inc.

OK
MS

ACCT 00002311 CLASS CODE 310
TRX 0001321515 Amount \$40.00

ACCT 00002311 CLASS CODE 340
TRX 0001321517 Amount \$25.00

FILING FEE - \$40.00, or more SEE instructions, suggestions and procedures on following pages.

DFI/CORP/4(R5/99) Use of this form is voluntary.

B. Amendment(s) adopted on November 3, 2000

(Indicate the method of adoption by checking (X) the appropriate choice below.)

- OR In accordance with sec. 180.1002, Wis. Stats. (By the Board of Directors)
- OR In accordance with sec. 180.1003, Wis. Stats. (By the Board of Directors and Shareholders)
- OR In accordance with sec. 180.1005, Wis. Stats. (By Incorporators or Board of Directors, before issuance of shares)

C. Executed on November 3, 2000
(Date)

Anthony W. Asmuth III
(Signature)

Title: President Secretary
or other officer title _____

Anthony W. Asmuth III
(Printed name)

This document was drafted by Anthony W. Asmuth III
(Name the individual who drafted the document)

INSTRUCTIONS (Ref. sec. 180.1006 Wis. Stats. for document content)

Submit one original and one exact copy to Dept. of Financial Institutions, P O Box 7846, Madison WI, 53707-7846, together with a **FILING FEE** of \$40.00 or more, payable to the department. (If sent by Express or Priority U.S. mail, address to 345 W. Washington Ave., 3rd Floor, Madison WI, 53703). This document can be made available in alternate formats upon request to qualifying individuals with disabilities. The original must include an original manual signature, per sec. 180.0120(3)(c), Wis. Stats. Upon filing, the information in this document becomes public and might be used for purposes other than that for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 608-266-8818 for TDY.

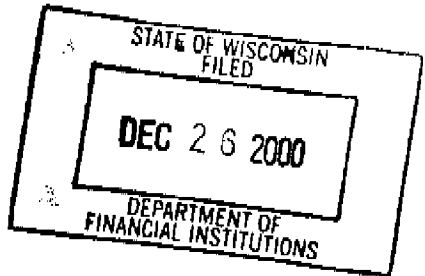
(1)

Amendment - Ch. 180

40.00
25.00

65.00

THE CORP. NAME =



By: Quarles + Brady LLP
411 E. Wisconsin Ave
Milwaukee WI 53202