

D

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

04-19-2001

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



101680340

3-29-01

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
09 25 2000

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year
09 25 2000

Name Pac-Fab, Inc.

Formerly _____

- Individual General Partnership Limited Partnership Corporation Association

Other _____

Citizenship/State of Incorporation/Organization Delaware

Receiving Party

Mark if additional names of receiving parties attached

Name Pentair Pool Products, Inc.



DBA/AKA/TA _____

03-29-2001

U.S. Patent & TMO/TM Mail Rpt Dt. #66

Composed of _____

Address (line 1) 1620 Hawkins Avenue

Address (line 2) _____

Address (line 3) Sanford North Carolina 27330

- Individual General Partnership Limited Partnership

- Corporation Association

Other _____

Citizenship/State of Incorporation/Organization Delaware

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.)

04/18/2001 ENCOUNTER 00000141 1850348

FOR OFFICE USE ONLY

65E

01 FL:451 40.00 UP
02 FL:452 20.00 UP

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

TRADEMARK
REEL: 002274 FRAME: 0093

00000141
ENCOUNTER
04/18/2001

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" value="1,860,348"/>	<input type="text" value="1,860,349"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

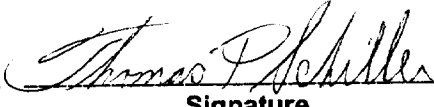
Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) #

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.

Thomas P. Schiller 

Name of Person Signing Signature Date Signed

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PAC-FAB, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "DENTAIR POOL PRODUCTS, INC.", THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2000, AT 2:15 O'CLOCK P.M.



A handwritten signature in cursive script, appearing to read "Edward J. Freel".

Edward J. Freel, Secretary of State

0776934 8320

AUTHENTICATION: 0722863

001507583

DATE: 10-08-00

20 304 5261

SOSID: 0109139
Date Filed: 11/17/2000 9:34 AM
Elaine F. Marshall
North Carolina Secretary of State

State of North Carolina
Department of the Secretary of State
APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

Pursuant to §§5-15-04 of the General Statutes of North Carolina, the undersigned corporation hereby applies for an Amended Certificate of Authority to transact business in the State of North Carolina and for that purpose submits the following statement:

- 1. The name of the corporation:
Pac-Fab, Inc.
 - 2. The name the corporation is currently using in the State of North Carolina is:
Pac-Fab, Inc.
 - 3. The state or country of incorporation is: Delaware
 - 4. The date the corporation was authorized to transact business in the State of North Carolina is:
October 18, 1972
 - 5. This application is filed for the following reason (complete all applicable items):
 - a. The corporation has changed its corporate name to:
Pentair Pool Products, Inc.
 - b. The name the corporation will hereafter use in the State of North Carolina is changed to:
Pentair Pool Products, Inc.
 - c. The corporation has changed its period of duration to: _____
 - d. The corporation has changed the state or country of its incorporation to: _____
 - 6. Attached is a certificate attesting to the change, duly authenticated by the secretary of state or other official having custody of corporate records in the state of country of incorporation.
 - 7. If the corporation is required to use a fictitious name in order to transact business in this State, a copy of the resolution of its board of directors, certified by its secretary, adopting the fictitious name is attached.
 - 8. This application will be effective upon filing, unless a date and/or time is specified: _____
- This the 26th day of September, 2000

Pentair Pool Products, Inc.
Name of Corporation

Roy T. Rusb
Signature

Roy T. Rusb, Secretary/Treasurer
Type or Print Name and Title

NOTES:
1. Filing fee is \$50. One executed original and one exact or conformed copy of this application must be filed with the Secretary of State.
2. * If the name of the corporation as changed is unavailable for use in North Carolina, indicate this fact and state the name the corporation wishes to use in North Carolina on 3b. (See NCGS §§5-15-06)

CORPORATIONS DIVISION P. O. BOX 29622 RALEIGH, NC 27626-0622
NCSOS: MANUFACT System Online