

12-05-2001



101908141

RE

11-7801

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# 101821323
- Correction of PTO Error
Reel # Frame #
- Corrective Document
Reel # Frame #

Conveyance Type

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

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name Windsor Acquisition, LLC

11/17/00

Formerly

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other

Citizenship/State of Incorporation/Organization Tennessee

Receiving Party

Mark if additional names of receiving parties attached

Name Windsor Forestry Tools, LLC

DBA/AKA/TA

Composed of

Address (line 1) 4520 Executive Park Drive

Address (line 2)

Address (line 3) Montgomery
City

Alabama
State/County

36116
Zip Code

- Individual
 - General Partnership
 - Limited Partnership
 - Corporation
 - Association
 - Other
- 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.)

Citizenship/State of Incorporation/Organization Tennessee

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

TRADEMARK
REEL: 002402 FRAME: 0311

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" value="75/776,978"/>	<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"/>	<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 deposition account are authorized, as indicated herein.

Thomas L Holt
Name of Person Signing

T L Holt
Signature

November 28, 2001
Date Signed

8-16-01

08-23-2001



101821323

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Name

DBA/AK/A/T/A

Composed of

Address (line 1)

Address (line 2)

Address (line 3)
City State/County Zip Code

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08-23-2001 101821323 00000014 75776979

40.00 CP

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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 **(312) 321-4231**

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

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

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

Number of Properties

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Fee Amount Fee Amount for Properties Listed (37 CFR 3.41):

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Deposit Account

(enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

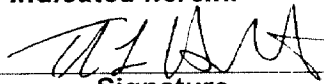
Authorization to charge additional fees:

Yes No

Statement and Signature

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Thomas L. Holt




August 13, 2001

Name of Person Signing

Signature

Date Signed

(2)

<p>State of Tennessee</p>  <p>Department of State Corporation Section 10th Floor, James K. Polk Building Nashville, TN 37243-0099</p> <p>ARTICLES OF AMENDMENT TO THE LIMITED LIABILITY COMPANY</p>	<p>For Office Use Only</p> <p>RECEIVED TENNESSEE</p>
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LIMITED LIABILITY COMPANY CONTROL NUMBER (IF KNOWN) 0396067 00 NOV 22 AM 11:27

PURSUANT TO THE PROVISIONS OF § 48-209-104 OF THE TENNESSEE LIMITED LIABILITY COMPANY ACT, THE UNDERSIGNED ADOPTS THE FOLLOWING ARTICLES OF AMENDMENT TO ITS LIMITED LIABILITY COMPANY:

DANIELL
SECRETARY OF STATE

PLEASE MARK THE BLOCK THAT APPLIES:

AMENDMENT IS TO BE EFFECTIVE WHEN FILED BY THE SECRETARY OF STATE.

AMENDMENT IS TO BE EFFECTIVE, _____ MONTH _____ DAY _____ YEAR

(NOT TO BE LATER THAN THE 90TH DAY AFTER THE DATE THIS DOCUMENT IS FILED.) IF NEITHER BLOCK IS CHECKED, THE AMENDMENT WILL BE EFFECTIVE AT THE TIME OF FILING.

1. PLEASE INSERT THE NAME OF THE LIMITED LIABILITY COMPANY AS IT APPEARS ON RECORD:

Windsor Acquisitions, LLC

IF CHANGING THE NAME, INSERT THE NEW NAME ON THE LINE BELOW:

Windsor Forestry Tech LLC

2. PLEASE INSERT ANY CHANGES THAT APPLY:

A. PRINCIPAL ADDRESS: (street) _____

CITY _____ STATE/COUNTY _____ ZIP CODE _____

B. REGISTERED AGENT: _____

C. REGISTERED ADDRESS: _____

STREET _____

CITY _____ STATE _____ ZIP CODE _____ COUNTY _____

D. OTHER CHANGES: _____

3. THE AMENDMENT WAS DULY ADOPTED ON: November 17, 2000

MONTH DAY YEAR

(NOTE: PLEASE MARK THE BLOCK THAT APPLIES)

THE BOARD OF GOVERNORS WITHOUT MEMBER APPROVAL, AS SUCH WAS NOT REQUIRED

THE MEMBERS

Senior Vice President, Blount, Inc., sole member
SIGNER'S CAPACITY

Richard H. Irving, III
SIGNATURE

Richard H. Irving
NAME OF SIGNER (TYPED OR PRINTED)