



Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)

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U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

Tab settings

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Thruport.com, Inc. 2.8.02

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

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

2. Name and address of receiving party(ies)

Name: Thruport Technologies, Inc.

Internal Address:

Street Address: 5440 Cherokee Avenue

City: Alexandria State: VA Zip: 22312

- Individual(s) citizenship Association General Partnership Limited Partnership Corporation-State Virginia 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 Merger Security Agreement Change of Name Other Fictitious Name Certificate

Execution Date: November 26, 2001

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

A. Trademark Application No.(s) 75/189647 76/305661 75/189995 76/305660 75/332625 76/305659

B. Trademark Registration No.(s) 2269915 2160794 2271212 2143980

Additional number(s) attached Yes No

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

Name: Pamela Haughton-Denniston, Esq.

Internal Address: Arent Fox Kintner Plotkin & Kahn, PLLC

Street Address: 1050 Connecticut Avenue, NW

City: Washington State: DC Zip: 20036

6. Total number of applications and registrations involved:

10

7. Total fee (37 CFR 3.41) \$ 265.00

- Enclosed Authorized to be charged to deposit account

8. Deposit account number:

(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.

Pamela Haughton-Denniston, Esq. Signature

February 7, 2002 Date

Total number of pages including cover sheet, attachments, and document: 5

Mail documents to be recorded with required cover sheet information to: Commissioner of Patent & Trademarks, Box Assignments Washington, D.C. 20231

03/01/2002 TDIAZ1 00000067 75189647

01 FC:481 40.00 DP 02 FC:482 225.00 DP

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JOEL H. PECK
CLERK OF THE COMMISSION
P.O. BOX 1197
RICHMOND, VIRGINIA 23218-1197

STATE CORPORATION COMMISSION

November 26, 2001

CARL J GOODWYN
CT RICHMOND
HOLD
DO NOT MAIL

RE: THRUPOINT.COM, INC.
ID: 0518309 - 0
DCN: 01-11-26-2309

Dear Customer:

This will acknowledge receipt of an attested copy of an assumed or fictitious name certificate for the captioned corporation conducting business under the assumed or fictitious name(s) of:

THRUPOINT TECHNOLOGIES, INC.
(ALEXANDRIA CI)

The filing fee of \$10.00 has been received.

If you have any questions, please call (804) 371-9733.

Sincerely,

Joel H. Peck
Clerk of the Commission

FICTACPT
CIS0436

FOR CORPORATIONS ONLY

CERTIFICATE REQUIRED TO BE FILED BY A CORPORATION CONDUCTING BUSINESS IN THE COMMONWEALTH OF VIRGINIA UNDER AN ASSUMED OR FICTITIOUS NAME.

We hereby certify in accordance with the provisions of § 59.1-69 of the 1950 Code of Virginia that we are conducting the business of computer technology (Type of Business) at 5440 Cherokee Avenue, Alexandria, VA 22312 (Address), Virginia, under the name of THRUPORT TECHNOLOGIES, INC. (Name of Business)

and that no other corporation or person has any interest of any kind in said business and that we are the sole owners and proprietors thereof and that our Post Office address is: 5440 Cherokee Avenue, Alexandria, VA 22312 and the Corporation's Registered Agent's name is Commonwealth Legal Services Corporation, and his address is 4701 Cox Road, Glen Allen, VA 23060

TO BE USED ONLY FOR FOREIGN CORPORATIONS
We further certify that we were authorized to do business in the Commonwealth of Virginia on the _____

Given under my hand this 15 day of November, 20 01.

THRUPORT COM, Inc.
CORPORATE NAME

BY:

Bruce M. Waldack, Chief Executive Officer and Sole Shareholder

State of Virginia
County of Fairfax, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that Bruce M. Waldack, whose name is signed to the foregoing and hereunto annexed Certificate dated the 15 day of November, 20 01, has this day personally appeared before me and acknowledged the same before me in my office.

Given under my hand this 15 day of November, 20 01.

Jinam K. Hellen
Deputy Clerk (Notary Public)

In the Clerk's Office of the Circuit Court of Fairfax County, Virginia November, 20 01, at _____ o'clock AM, this Certificate with the Certificate of Acknowledgment annexed, was recorded and filed and admitted to record.

TESTE:

BY: _____
Deputy Clerk

CERTIFICATE OF ALL PERSONS OR CORPORATIONS COMPOSING FICTITIOUS FIRM NAME OR CORPORATION OR CO-PARTNERSHIP: (As Required by Section 50-74 and Section 59.1-69, Code of Virginia)

Individual Co-Partnership


Corporation: Thruport.com, Inc.

Original Corporate name

This is to certify that the following named persons or corporations, with their respective post-office and residence addresses, embrace the names of each and every person or corporation owning or composing the fictitious firm name or corporation or co-partnership, trading as Thruport Technologies, Inc.

located at 5440 Cherokee Ave., Alexandria, VA 22312 and that the length of time for which said co-partnership is to continue is perpetual, and if a foreign corporation it was authorized to do business in the State of Virginia on the _____ day of N/A 20____.

NAME OF PERSON (Please Print) SIGNATURE RESIDENCE AND POST OFFICE ADDRESS (if any)

Bruce M. Waldack  5440 Cherokee Avenue
Alexandria, Virginia 22312

STATE OF VIRGINIA,

CITY OF ALEXANDRIA, to-wit:

I, Jina M. Hefflin, a Notary Public/Deputy Clerk in and for the City/County aforesaid, whose commission expires on the 30 day of September, 2004, do hereby certify that

Bruce M. Waldack whose name(s) is/are signed to the writing above, has/have acknowledged the same before me in my City/County aforesaid,

or

whose name(s) as Corporate Officer(s) of the above corporation, is/are signed to the writing above has/have acknowledged the same before me in my City/County aforesaid.

Give under my hand this, the 15 day of November, 2001.



Deputy Clerk/Notary Public

VIRGINIA:

IN THE CLERK'S OFFICE OF THE CIRCUIT COURT OF THE CITY OF ALEXANDRIA, ON THE _____ DAY OF _____, 2001.

This certificate was this day received and upon certificate of acknowledgment thereto annexed, admitted to record.

TESTE:

By: _____
Deputy Clerk