

2002 MAR 13 AM 10:10



To the Honorable Commissioner of Finance and Public Safety, FINANCE SECTION 102046917 or copy thereof.

1. Name of Conveying Party(ies):
WTD Industries, Inc. **3-13-02**
10260 SW Greenburg Road, Suite 1200
Portland, Oregon 97223

Type of Entity:
 Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State: Oregon
 Other _____

2. Name and Address of Receiving Party(ies):
Name: TreeSource Industries, Inc.
Internal Address: _____
Street Address: 529 SE Grand Avenue, Suite 300
City: Portland State: Oregon Zip: 97214

Type of Entity:
 Individual(s) Citizenship _____
 Association _____
 General Partnership _____
 Limited Partnership _____
 Corporation-State: Oregon
 Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: YES NO
(Designations must be separate document from Assignment)
Additional name(s) & address(es) attached? YES NO

3. Nature of Conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other _____

Execution Date: October 26, 1998

4. Application number(s) or registration number(s):
A. Trademark Application Number(s):

B. Trademark Registration No.(s):
1,312,604
1,388,546

Additional numbers attached? YES NO

5. Name and address of party to whom correspondence concerning document should be mailed:
Name: Scott L. Gilfillan
Internal Address: Foster Pepper & Shefelman LLP
101 SW Main Street, 15th Floor
Portland, Oregon 97204

6. Total number of applications and registrations involved: 2

7. Total fee (37 CFR 3.41): \$65.00
 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.

Scott L. Gilfillan Scott L. Shefelman 3/13/02
Name of Person Signing Signature Date

04/05/2002 TBIAZ1 00000033 1312604

01 FC:481 40.00 OP
02 FC:482 25.00 OP



Phone: (503) 986-2200
Fax: (503) 378-4381

10/27/98 9:35AM 0004212 A50
Articles of Amendment—Business/Professional/Nonprofit 0.00

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327

Check the appropriate box below:

- BUSINESS/PROFESSIONAL CORPORATION
(Complete only 1, 2, 3, 4, 6, 7)
- NONPROFIT CORPORATION
(Complete only 1, 2, 3, 5, 6, 7)

For office use only

FILED

OCT 27 1998

**OREGON
SECRETARY OF STATE**

Registry Number: 166163-10

Attach Additional Sheet if Necessary
Please Type or Print Legibly in Black Ink

1) NAME OF CORPORATION PRIOR TO AMENDMENT WTD Industries, Inc.

2) STATE THE ARTICLE NUMBER(S) AND SET FORTH THE ARTICLE(S) AS IT IS AMENDED TO READ. (Attach a separate sheet if necessary.)
"FOURTH RESTATED ARTICLES OF INCORPORATION OF TREESOURCE INDUSTRIES, INC."
"ARTICLE 1. NAME The name of the corporation is TreeSource Industries, Inc."

3) THE AMENDMENT WAS ADOPTED ON: October 26, 1998
(If more than one amendment was adopted, identify the date of adoption of each amendment.)

BUSINESS/PROFESSIONAL CORPORATION ONLY

4) CHECK THE APPROPRIATE STATEMENT

Shareholder action was required to adopt the amendment(s). The vote was as follows:

Class or series of shares	Number of shares outstanding	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST
Common	11,162,874	11,162,874	6,037,255	3,554,916

Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.

The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

NONPROFIT CORPORATION ONLY

5) CHECK THE APPROPRIATE STATEMENT

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required. The membership vote was as follows:

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

6) EXECUTION

Printed Name

Robert J. Riecke

Signature

Robert J. Riecke

Title

Secretary

7) CONTACT NAME

Robert J. Riecke

DAYTIME PHONE NUMBER

(503) 246-3440

10/27/98

FEES

Make check for \$10 payable to "Corporation Division."

NOTE: Filing fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

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