

2/25/2004
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Form PTO-1594
(Rev. 10/02)
OMB No. 0651-0027 (exp. 6/30/2005)
Tab settings $\Rightarrow \Rightarrow \Rightarrow$ ∇

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

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

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

1. Name of conveying party(ies):

Strategic Financing, Inc.

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

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

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other
- Merger
- Change of Name

Execution Date: _____

2. Name and address of receiving party(ies)

Name: Skylark Meats Inc.

Internal

Address: _____

Street Address: 1120 lake Avenue

City: Fairmont State: Mn Zip: 56031

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership
- Corporation-State Nebraska
- 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

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

A. Trademark Application No.(s) 76273204

B. Trademark Registration No.(s) _____

Additional number(s) attached Yes No

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

Name: James A. Blomquist

Internal Address: Suite 2200

Street Address: 220 South Sixth Street

City: Minneapolis State: Mn Zip: 55402-4504

6. Total number of applications and registrations involved: _____

15

7. Total fee (37 CFR 3.41).....\$ 390.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

502277

DO NOT USE THIS SPACE

9. Signature.

James A. Blomquist
Name of Person Signing


Signature

02/25/2004
Date

Total number of pages including cover sheet, attachments, and document: 3

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

Recordation Form Cover Sheet


Trademarks Only

Continuation of Item 4 Skylark Meats Inc.:

- 76273203
- 76272504
- 76273095
- 75134688
- 75824356
- 73441541
- 73202772
- 73421295
- 73429673
- 73561737
- 75645887
- 78291975
- 75632058

Form FTO-1094 (Rev. 10/02) OMB No. 0651-0027 (exp. 9/30/2005)
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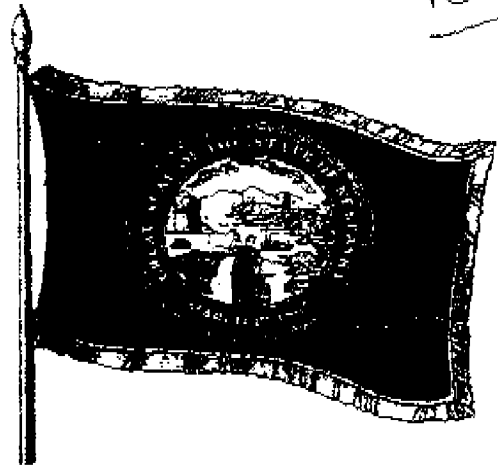
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): Strategic Financing, Inc. <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <input type="checkbox"/> Other Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Name and address of receiving party(ies) Name: Skylark Meats Inc. Internal Address: Street Address: 1120 Lake Avenue City: Fairmont State: Mo Zip: 66031 <input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State Nebraska <input type="checkbox"/> Other If assignee is not domiciled in the United States representative designation is attached: <input type="checkbox"/> (Designations must be a separate document) Additional name(s) & address(es) attached? <input type="checkbox"/>
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other Execution Date:	4. Application number(s) or registration number(s): A. Trademark Application No. (s): 76273204 B. Trademark Registration No. (s): Additional number(s) attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. Name and address of party to whom correspondence concerning document should be mailed: Name: James A. Blomquist Internal Address: Suite 2200 Street Address: 220 South Sixth Street City: Minneapolis State: Mn Zip: 55402-4504	
6. Total number of applications and registrations involved:	
7. Total fee (37 CFR 3.41) \$ 390.00 ALREADY CHARGED*** <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account	
8. Deposit account number: 502277	
9. Signature. Name of Person Signing: James A. Blomquist Signature:  Date: 3/2/2004 Total number of pages including cover sheet, attachments, and document: 3	

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Washington, D.C. 20231

STATE OF

NEBRASKA



United States of America, }
State of Nebraska } ss.

Department of State
Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

Articles of Merger of

O'BRIEN & CO., INC.

with registered office located in LINCOLN, Nebraska, merging into

STRATEGIC FINANCING, INC.

with registered office located in LINCOLN, Nebraska, changing
corporate name to

SKYLARK MEATS, INC.

were filed in this office on October 4, 2003.

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the State
of Nebraska on February 23, 2004.

John A. Gale
SECRETARY OF STATE

