


Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

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

<p>1. Name of conveying party(ies): Asystiv, LLC</p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation-State <input checked="" type="checkbox"/> Other <u>Delaware Limited Liability Company</u></p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies) Name: <u>InXpo, LLC</u> Internal Address: <u>Suite 105 North</u> Street Address: <u>3000 Lakeside Place</u> City: <u>Bannockburn</u> State: <u>IL</u> Zip: <u>60015</u></p> <p><input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation-State <input checked="" type="checkbox"/> Other <u>Delaware Limited Liability Company</u></p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>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 _____</p> <p>Execution Date: <u>4/20/2004</u></p>	<p>4. Application number(s) or registration number(s): A. Trademark Application No.(s) <u>78398526</u> Mark: <u>INXPO</u></p> <p>B. Trademark Registration No.(s) _____</p> <p>Additional number(s) attached <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Eric S. Freibrun</u> Internal Address: <u>Law Offices of Eric S. Freibrun, Ltd.</u> Street Address: <u>630 Dundee Road, Suite 120</u> City: <u>Northbrook</u> State: <u>IL</u> Zip: <u>60062</u></p>	<p>6. Total number of applications and registrations involved: <u>1</u></p> <p>7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: _____</p>
<p>DO NOT USE THIS SPACE</p> <p>9. Signature. <u>Eric S. Freibrun</u> Name of Person Signing <u></u> Signature <u>5/19/04</u> Date</p> <p>Total number of pages including cover sheet, attachments, and document: <u>12</u></p>	

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

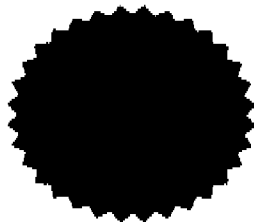
OP \$40.00 78398526

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ASYSTIV, LLC", CHANGING ITS NAME FROM "ASYSTIV, LLC" TO "INXPO, LLC", FILED IN THIS OFFICE ON THE TWENTIETH DAY OF APRIL, A.D. 2004, AT 11:30 O'CLOCK A.M.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3062903

DATE: 04-20-04

3774028 8100

040286714

TRADEMARK

REEL: 002860 FRAME: 0537

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:30 AM 04/20/2004
FILED 11:30 AM 04/20/2004
SRV 040286714 - 3774028 FILE

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF FORMATION
OF
ASYSTIV, LLC

Asystiv, LLC (hereinafter called the "company"), a limited liability company organized and existing under and by virtue of the Limited Liability Company Act of the State of Delaware, does hereby certify:

1. The name of the limited liability company is Asystiv, LLC

2. The certificate of formation of the company is hereby amended by striking out Article 1 thereof and by substituting in lieu of said Article 1 the following new Article 1:

"1. The name of the limited liability company is InXpo, LLC"

Executed on this 9th day of April, 2004.



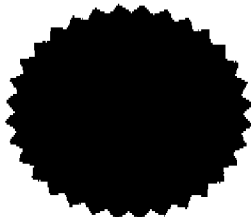
Malcolm Lotzof, Manager

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "ASYSTIV, LLC", FILED IN THIS OFFICE ON THE EIGHTH DAY OF MARCH, A.D. 2004, AT 2:02 O'CLOCK P.M.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2974555

DATE: 03-08-04

3774028 8100

040172371

TRADEMARK
REEL: 002860 FRAME: 0539

CERTIFICATE OF FORMATION

OF

ASYSTIV, LLC

The undersigned, an authorized natural person, for the purpose of forming a limited liability company (hereinafter called the "company"), under the provisions and subject to the requirements of the Delaware Limited Liability Company Act, hereby certifies that:

- 1. The name of the limited liability company is Asystiv, LLC
- 2. The address of the registered office and the name and the address of the registered agent of the limited liability company required to be maintained by Section 18-104 of the Delaware Limited Liability Company Act are National Registered Agents, Inc., 9 East Lockerman Street, Suite 1B, Dover, Delaware 19901.

Executed on March 8, 2004.



 Carol A. Detert, Authorized Person

State of Delaware
 Secretary of State
 Division of Corporations
 Delivered 02:09 PM 03/08/2004
 FILED 02:02 PM 03/08/2004
 SRV 040172371 - 3774028 FILE

Delaware Limited Liability Certificate of Formation 1/96-1



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

0114531-2

04/22/2004

JAMES R. ASMUSSEN
444 N. MICHIGAN AVE., STE.2500
CHICAGO, IL 60611-0000

RE ASYSTIVE, LLC - ORG: INXPO, LLC
ASE: INXPO

DEAR SIR OR MADAM:

AMENDED APPLICATION FOR ADMISSION HAS BEEN PLACED ON FILE, AND THE LIMITED LIABILITY COMPANY HAS BEEN CREDITED WITH THE REQUIRED FILING FEE.

APPLICATION TO ADOPT AN ASSUMED NAME HAS BEEN PLACED ON FILE AND THE LIMITED LIABILITY COMPANY CREDITED WITH THE REQUIRED FEE.

SINCERELY YOURS,

JESSE WHITE
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY COMPANY DIVISION
TELEPHONE (217)524-8008

JW:LLC

Form **LLC-45.25**

December 2003

Jesse White
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 351, Howlett Building
Springfield, IL 62758
<http://www.cyberdriveillinois.com>

Payment may be made by business
firm check payable to Secretary of State.
(If check is returned for any reason this
filing will be void.)

Illinois
Limited Liability Company Act

Amended Application for Admission

Filing Fee (See Instructions)

Submit in Duplicate

Must be typewritten

This space for use by Secretary of State

Date 4-22-04
Assigned File # 0114-531-2
Filing Fee \$150
Approved Jb

*This space for use by
Secretary of State*

FILED

APR 22 2004

LIMITED LIABILITY CO. DIV.
JESSE WHITE
SECRETARY OF STATE

- Limited Liability Company name: Asystiv, LLC
- File number assigned by the Secretary of State: 0114531-2
- This amended application is accompanied by a copy of the Articles of Amendment to the Articles of Organization, as evidence of any change, such copy being duly authenticated by the proper officer of the state or country wherein the limited liability company is organized, which certification is not more than 60 days old.
- The text of the amendment is:
 - Limited Liability Company name: InXpo, LLC
- I affirm, under penalties of perjury, having authority to sign hereto, that this amended application for admission is to the best of my knowledge and belief, true, correct and complete.

Dated April 9, 2004
(Month/Day) (Year)

Malcolm Lozzof, Manager

(Type or print name and title)

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

INSTRUCTIONS:

If the only amendment reported is a change in the registered agent and/or registered office, the filing fee is \$35.
If other changes are reported, the filing fee is \$150.

Form **LLC-1.20**

March 2002

Jesse White
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 351, Howlett Building
Springfield, IL 62756
http://www.itsos.net

Payment may be made by business firm check payable to Secretary of State. (If check is returned for any reason this filing will be void.)

**Illinois
Limited Liability Company Act**

- a. Application to Adopt an Assumed Name
- b. Application to Change An Assumed Name
- c. Application to Cancel An Assumed Name

Filing Fee: (see note)

Submit in Duplicate
Must be typewritten

This space for use by Secretary of State

Date 4-22-04
Assigned File # 0014-531-2
Filing Fee 76 \$ 30
Approved

This space for use by Secretary of State

FILED

APR 22 2004

LIMITED LIABILITY CO. DIV.
JESSE WHITE
SECRETARY OF STATE

1. Limited Liability Company name: InXpo, LLC
2. File number assigned by the Secretary of State: 0014531-2
3. Federal Employer Identification Number (F.E.I.N.): _____
4. The state or country under the laws of which the limited liability company is organized is: (check one)
 Illinois (domestic) Foreign (specify): Delaware
5. Date organized (if an Illinois limited liability company) or date authorized to transact business in Illinois (if a foreign limited liability company): _____
6. The limited liability company intends to adopt and to transact business under the assumed name of: InXpo
7. The right to use the assumed name shall be effective from the date this application is filed by the Secretary of State until March 1, 20 05, the first day of the limited liability company's anniversary month in the next year which is evenly divisible by five.
8. TO CHANGE: (a) The above-named limited liability company intends to cease transacting business under the assumed name of: _____
 (b) and to commence transacting business under the new assumed name: _____
9. TO CANCEL: The above-named limited liability company intends to cease transacting business under the assumed name of: _____

LLC-1.20

10. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application to adopt, change, or cancel an assumed name is to the best of my knowledge and belief, true, correct and complete.

Dated April 9, 2004

(Month & Day)

(Year)

Malcolm Lotzof, Manager

(Type or print Name and Title)

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

- NOTE:
- a. An assumed name may be adopted in 5 year increments. The right to use an assumed name shall be effective from the date of filing by the Secretary of State until the first day of the anniversary month of the limited liability company that falls within the next calendar year evenly divisible by 5.
 - b. The filing fee to adopt an assumed name is \$150 for each year or part thereof ending in 0 or 5, \$120 for each year or part thereof ending in 1 or 6, \$90 for each year or part thereof ending in 2 or 7, \$60 for each year or part thereof ending in 3 or 8, \$30 for each year or part thereof ending in 4 or 9.
 - c. The fee to change an assumed name is \$100.
 - c. The fee for cancelling an assumed name is \$100.
 - e. An assumed name may be renewed 60 days prior to the expiration of the right to use the assumed name, for a period of 5 years, by making an election to do so at the time of filing its annual report and by paying the renewal fees as prescribed by this Act.



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

MARCH 24, 2004

0114531-2

JAMES R. ASMUSSEN
444 N. MICHIGAN AVE., STE.2500
CHICAGO, IL 60611-0000

RE ASYSTIV, LLC

DEAR SIR OR MADAM:

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND AN APPROVED APPLICATION OF ADMISSION.

THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SINCERELY YOURS,

JESSE WHITE
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY COMPANY DIVISION
TELEPHONE (217)524-8008

JW:LLC

Form **LLC-45.5**

December 2003

Jesse White
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 351, Howlett Building
Springfield, IL 62756
http://cyberdriveillinois.com

Payment must be made by certified check, cashier's check, Illinois attorney's C.P.A.'s check or money order, payable to "Secretary of State."

Illinois Limited Liability Company Act

Application for Admission to Transact Business

Submit in Duplicate
Must be typewritten

This space for use by Secretary of State

Date 3-24-04
Assigned File # 0114-531-2
Filing Fee \$500
Penalty \$
Approved: JB \$

This space for use by Secretary of State

FILED

MAR 24 2004

**LIMITED LIABILITY CO. DIV.
JESSE WHITE
SECRETARY OF STATE**

- Limited Liability Company name: Asystiv, LLC
(Must comply with Section 1-10 of ILLCA or article 2 below applies.)
- The assumed name, other than the true company name, under which the LLC proposes to transact business in Illinois is: _____
(If applicable, a form LLC-1.20, Application to Adopt an Assumed Name, is required to be completed and attached to this application.)
- Jurisdiction of Organization: Delaware
- Date of Organization: March 8, 2004
- Period of Duration: Perpetual
- The address, including county, of the office required to be maintained in the jurisdiction of its organization, or if not required, of the principal place of business (Post office box alone and c/o are unacceptable):
(See #14 on back)
3000 Lakeshore Drive, Suite 105N
(Number) (Street) (Suite)
Bannockburn, Illinois 60015 Cook County
(City/State) (ZIP Code) (County)
- Registered agent: James R. Asmussen
(First Name) (Middle Name) (Last Name)
Registered Office: 444 North Michigan Avenue, Suite 2500
(Number) (Street) (Suite #)
(P.O. Box or c/o Chicago, County of Cook Illinois 60611
are unacceptable) *(City) (County) (ZIP Code)*
- The date on which this foreign LLC first did business in Illinois: date of filing

LLC-45.5

9. The purpose or purposes for which the company is organized and proposes to conduct in this State: Include the business code # (IRS Form 1065).

The transaction of any or all lawful businesses for which limited liability companies may be organized under the Delaware Limited Liability Company Act and the Illinois Limited Liability Company Act.

Permitted Under

10. The limited liability company is managed by:

manager(s)

vested in member(s)

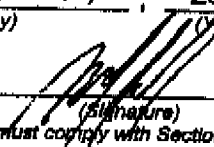
11. The Illinois Secretary of State is hereby appointed the agent of the limited liability company for service of process under the circumstances set forth in a subsection (b) of Section 1-50 of the ILLCA.

12. This application is accompanied by a certificate of good standing or existence, as well as a copy of the articles of organization, as amended, duly authenticated within the last thirty (30) days, by the officer of the state or country wherein the LLC is formed.

13. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date must also be submitted.

14. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated March 1, 2004
(Month/Day) (Year)


(Signature)
(Signature must comply with Section 5-46 of ILLCA)

Malcolm Lotzof, Manager
(Type or print name and title)

*(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

*Please refer to Sections 178.20(d) of the Administrative Rules