

Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)

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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):

MindBox Acquisition, LLC

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

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

3. Nature of conveyance:

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

Execution Date: 07/07/2003

2. Name and address of receiving party(ies)

Name: MindBox LLC

Internal Address:

Street Address: 300 Drake's Landing, Suite 155

City: Greenbrae State: CA Zip: 94904

- Individual(s) citizenship Association General Partnership Limited Partnership Corporation-State Other limited liability company

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)

B. Trademark Registration No.(s) 1,430,923; 1,857,208; 1,552,660

Additional number(s) attached Yes No

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

Name: Becky Troutman

Internal Address:

Street Address: Thelen Reid & Priest LLP

PO Box 190187

City: San Francisco State: CA Zip: 94119

6. Total number of applications and registrations involved:

3

7. Total fee (37 CFR 3.41): \$ 90

- Enclosed Authorized to be charged to deposit account

8. Deposit account number:

500918

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9. Signature.

Becky Troutman

Name of Person Signing

Signature

Date June 16, 2004

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

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NO. 387 P. 2



State of California
Kevin Shelley
Secretary of State

FILED
in the office of the Secretary of State
of the State of California

JUL 07 2003

Kevin Shelley
KEVIN SHELLEY, SECRETARY OF STATE

**LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT**

A \$30.00 filing fee must accompany this form.

This Space For Filing Use Only

IMPORTANT - Read instructions before completing this form.

1. SECRETARY OF STATE FILE NUMBER 200304510070	2. NAME OF LIMITED LIABILITY COMPANY MindBox Acquisition, LLC
3. COMPLETE ONLY THE SECTIONS WHERE INFORMATION IS BEING CHANGED. ADDITIONAL PAGES MAY BE ATTACHED IF NECESSARY.	
A. LIMITED LIABILITY COMPANY NAME (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY," "LTD. LIABILITY CO." OR THE ABBREVIATIONS "LLC" OR "L.L.C.") MindBox, LLC	
B. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONE): <input type="checkbox"/> ONE MANAGER <input type="checkbox"/> MORE THAN ONE MANAGER <input type="checkbox"/> ALL LIMITED LIABILITY COMPANY MEMBER(S)	
C. AMENDMENT TO TEXT OF THE ARTICLES OF ORGANIZATION:	
D. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE. OTHER MATTERS MAY INCLUDE A CHANGE IN THE LATEST DATE ON WHICH THE LIMITED LIABILITY COMPANY IS TO DISSOLVE OR ANY CHANGE IN THE EVENTS THAT WILL CAUSE THE DISSOLUTION.	
4. FUTURE EFFECTIVE DATE, IF ANY: MONTH DAY YEAR	
5. NUMBER OF PAGES ATTACHED, IF ANY:	
6. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.	
SIGNATURE OF AUTHORIZED PERSON	DATE
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
7. RETURN TO: NAME Laura Murphy FIRM Murphy Noel Capital, LLC ADDRESS 280 N. Westlake Blvd., Suite 200 CITY/STATE Westlake Village, CA 91362 ZIP CODE	

APPROVED BY SECRETARY OF STATE

SECRETARY OF STATE FORM LLC-2 (Rev. 04/2003) - FILING FEE \$30.00

20/20

RECORDED: 06/16/2004

TRADEMARK

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