

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

<p>1. Name of conveying party(ies): <u>Boost Internet Service, LLC</u></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>Limited Liability Company - Nevada</u></p> <p>Additional name(s) of conveying party(ies) 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 type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other <u>Correction of serial number typographical error at reel frame 002549/0758</u></p> <p>Execution Date: <u>July 9, 2004</u></p>	<p>2. Name and address of receiving party(ies)</p> <p>Name: <u>Boost, LLC</u></p> <p>Internal Address: _____</p> <p>Street Address: <u>5975 Los Altos Parkway, Suite 102</u> City: <u>Sparks</u> State: <u>Nevada</u> Zip: <u>89436</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>Limited Liability Company - Nevada</u></p> <p><small>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 checked="" type="checkbox"/> No</small></p>
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<p>4. Application number(s) or registration number(s):</p> <p>A. Trademark Application No.(s) <u>78/117570</u></p> <p style="text-align: right;">Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>B. Trademark Registration No.(s)</p>
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<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>Marlene J. Williams</u></p> <p>Internal Address: <u>Thelen Reid & Priest LLP</u></p> <p>Street Address: <u>P.O. Box 190187</u></p> <p>City: <u>San Francisco</u> State: <u>CA</u> Zip: <u>94119</u></p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 3.41) \$ <u>40.00</u></p> <p><input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: <u>50-0918</u></p> <p><small>(Attach duplicate copy of this page if paying by deposit account)</small></p>
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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.

Marlene J. Williams

July 9, 2004

Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments and document 2

CH \$40.00 500918 78117570

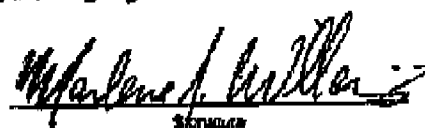
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Form PTO-1894 (Rev. 05/01) CMB No 0651-0087 (exp. 5/31/2002) Tab settings		RECORDATION FORM COVER SHEET TRADEMARKS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): Boost Internet Service, LLC <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 Limited Liability Company - Nevada Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			2. Name and address of receiving party(ies) Name: <u>Boost, LLC</u> Internal Address _____ Street Address: <u>5975 Los Altos Parkway, Suite 102</u> City: <u>Sparks</u> State: <u>Nevada</u> Zip: <u>89438</u> <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 Limited Liability Company - Nevada <small>If assignee is not domiciled in the United States, a domestic representative designation is attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment)</small> Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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: <u>August 8, 2002</u>					
4. Application number(s) or registration number(s): A. Trademark Application No.(s) <u>761178570</u> <small>Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</small>			B. Trademark Registration No.(s) _____		
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Mariene J. Williams</u> Internal Address: <u>Thelen Reid & Priest LLP</u> Street Address: <u>P.O. Box 190187</u> City: <u>San Francisco</u> State: <u>CA</u> Zip: <u>94119</u>			6. Total number of applications and registrations involved: 1		
			7. Total fee (37 CFR 3.41) \$ 40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account		
			8. Deposit account number: <u>50-0818</u> <small>(Attach duplicate copy of this page if paying by deposit account)</small>		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>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.</i>					
Mariene J. Williams Name of Person Signing		 Signature		<u>September 30, 2002</u> Date	
Total number of pages (including cover sheet, attachments and documents) 2					

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

SP #88682-1



DEAN HELLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684 5708

Amendment to
Articles of
Organization
(PURSUANT TO NRS 86.221)

FILED # UC 468-02

AUG 08 2002

IN THE OFFICE OF
Dean Heller
DEAN HELLER, SECRETARY OF STATE

Important: Read attached instructions before completing

Certificate of Amendment to Articles of Organization
For a Nevada Limited-Liability Company
(Pursuant to NRS 86.221)
- Remit in Duplicate -

1. Name of limited-liability company: **BOOST INTERNET SERVICE, LLC**

2. The articles have been amended as follows (provide articles numbers, if available): *

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

The name of the limited liability company is BOOST, LLC (the "Company").

3. Indicate whether the company is managed by managers or members: **member managed**

4. Signature (must be signed by at least one manager or by a managing member).

Signature

* 1) If adding managers, provide names and addresses.

2) If amending company name, it must contain the words "Limited-Liability Company,"
"Limited Company," or "Limited" or the abbreviations "Ltd.," "L.L.C.," or "L.C.," "LLC" or "LC."
The word "Company" may be abbreviated as "Co."

FILING FEE: \$150.00

IMPORTANT: Failure to include any of the above information and remit the proper fees may cause this filing to be rejected.