

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
North Supply Company		05/17/2002	CORPORATION: OHIO
RECEIVING PARTY DATA			
Name:	Sprint North Supply Company		
Street Address:	6200 Sprint Parkway		
Internal Address:	KSOPHF0302		
City:	Overland Park		
State/Country:	KANSAS		
Postal Code:	66251		
Entity Type:	CORPORATION: OHIO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2204138	PROTEGE	
CORRESPONDENCE DATA			
Fax Number:	(913)523-0609		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	913-315-8537		
Email:	elena.powell@mail.sprint.com		
Correspondent Name:	Angela G. McGuire c/o Elena Powell		
Address Line 1:	6450 Sprint Parkway		
Address Line 2:	KSOPHN0312-3A500		
Address Line 4:	Overland Park, KANSAS 66251		
NAME OF SUBMITTER:	Angela G. McGuire		
Signature:	/Angela G. McGuire/		
Date:	03/10/2005		

OP \$40.00 2204138

Total Attachments: 3
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DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
05/28/2002	200214800156	DOMESTIC/AMENDMENT TO ARTICLES (AMD)	50.00	100.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

CSC
700 S. Second Street
Springfield, IL 62704

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, J. Kenneth Blackwell

366668

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

SPRINT NORTH SUPPLY COMPANY

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC/AMENDMENT TO ARTICLES

Document No(s):

200214800156



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 24th day of May, A.D. 2002.

J. Kenneth Blackwell
Ohio Secretary of State



Prescribed by J. Kenneth Blackwell

Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following

Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***

No PO Box 1028
Columbus, OH 43216

Certificate of Amendment by
Shareholders or Members Amendment/Restatement/Correction
(Domestic)
Filing Fee \$50.00

(CHECK ONLY ONE (1) BOX)

(1) Domestic for Profit
(2) Domestic Non-Profit
Amended Amendment
(122-AMAP) (125-AMDS)

Complete the general information in this section for the box checked above.

Name of Corporation North Supply Company
Charter Number 366668
Name of Officer Laura L. Ozenberger
Title Assistant Secretary

Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

A meeting of the shareholders members was duly called and held on

(Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise % as the voting power of the corporation.

In a writing signed by all of the shareholders members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.
If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: Sprint North Supply Company

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

_____ (city, village or township)

_____ (county)

THIRD: The purposes of the corporation are as follows:


FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____

(Does not apply to box (2))

REQUIRED

Must be authenticated
(signed) by an authorized
representative

(See Instructions)



Authorized Representative Laura L. Ozenberger,
Assistant Secretary

May 17, 2002

Date

Authorized Representative

Date

Authorized Representative

Date