


Form PTO-1594 (Rev. 03/05)
OMB Collection 0651-0027 (exp. 6/30/2005)

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

Attorney Docket No.: I0181-4009

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below:

1. Name of conveying party(ies) Name: Cable Design Technologies 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: <u>Washington</u> <input type="checkbox"/> Other _____ Citizenship: (see guidelines) _____ Additional name(s) of conveying party(ies) attached? No		2. Name and address of receiving party(ies): Name: Belden CDT Networking, Inc. Internal Address: Street Address: 793 Fort Mill Highway City: Fort Mill State: South Carolina Country: <u>U.S.</u> Zip: <u>29715</u> <input type="checkbox"/> Association _____ <input type="checkbox"/> Citizenship <input type="checkbox"/> General Partnership <input type="checkbox"/> Citizenship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Citizenship <input checked="" type="checkbox"/> Corporation – Citizenship: <u>Washington</u> <input type="checkbox"/> Other Citizenship: 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.)	
3. Nature of conveyance/Execution Date(s): Execution date(s) <u>January 26, 2005</u> <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____			
4. Application number(s) or Registration number(s): A. Trademark Application No(s): <p style="text-align: center;">SEE ATTACHED LIST</p>		B. Trademark Registration No(s): <p style="text-align: right;">Additional number(s) attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown)			
5. Name and address of party to whom correspondence concerning document should be mailed: Ann Lamport Hammitte Lowrie, Lando & Anastasi, LLP Riverfront Office Park One Main Street, Eleventh Floor Cambridge, MA 0214 Phone No.: 617-395-7000 Fax No. 617-395-7070 Email Address: ahammitte@LL-A.com		6. Total number of applications and registrations involved: <u>5</u> 7. Total fee (37 CFR 2.6(b)(6) & 3.41)) <u>\$ 140.00</u> <input type="checkbox"/> Authorized to be charged by credit card <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed	
9. Signature:  Signature Ann Lamport Hammitte (Name of person signing)		8. Payment information: a. Credit Card Last 4 numbers _____ Expiration Date: _____ b. Deposit Account Number: <u>50/2762</u> January 18, 2006 Date Total Number of pages including cover sheet, attachments, and document. <u>4</u>	

Mail documents to be recorded with required cover sheet information to:
Mail Stop Assignment Recordation Services, Director of the U.S. Patent and Trademark Office, P.O. Box 1450,
Alexandria, VA 22313-1450

TRADEMARK
REEL: 003251 FRAME: 0944

SCHEDULE A**REGISTERED U.S. TRADEMARKS
in the name of Cable Design Technologies Inc.**

Reg. No.	Reg. Date	Mark
1,387,402	03-25-1986	COPOLENE
1,526,684	02-28-1989	COPOLENE II
1,256,744	11-08-1983	PLENECON
1,189,845	02-16-1985	PERFECT PAIR
1,189,846	02-16-1985	PERFECT STRIPE

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, Sam Reed, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

certificate that the attached is a true and correct copy of

ARTICLES OF AMENDMENT

of

CABLE DESIGN TECHNOLOGIES INC.

CHANGING NAME TO BELDEN CDT NETWORKING, INC.

as filed in this office on January 27, 2005.

Date: December 27, 2005



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed

Sam Reed, Secretary of State

TRADEMARK



STATE OF WASHINGTON
SECRETARY OF STATE

ARTICLES OF AMENDMENT
WASHINGTON

PROFIT CORPORATION
(Per Chapter 23B.10 RCW)

FILED
SECRETARY OF STATE
SAM REED

FEE: \$30

EXPEDITED (24 HOUR) SERVICE AVAILABLE - \$30 PER ENTITY
INCLUDE FEE AND WRITE "EXPEDITE" IN BOLD LETTERS
ON OUTSIDE OF ENVELOPE

STATE OF WASHINGTON

FILED

- Please PRINT or TYPE in black ink
- Sign, date and return original AND ONE COPY to

CORPORATIONS DIVISION
801 CAPITOL WAY SOUTH • PO BOX 40234
OLYMPIA, WA 98504-0234

- BE SURE TO INCLUDE FILING FEE. Checks should be made payable to "Secretary of State"

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IMPORTANT! Person to contact about this filing Kevin L. Bloomfield	Daytime Phone Number (with area code) 314-854-8030
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AMENDMENT TO ARTICLES OF INCORPORATION

NAME OF CORPORATION (As currently recorded with the Office of the Secretary of State) Cable Design Technologies Inc.		
UBI NUMBER 601 124 898	CORPORATION NUMBER (If known)	AMENDMENTS TO ARTICLES OF INCORPORATION WERE ADOPTED ON Date: _____
EFFECTIVE DATE OF ARTICLES OF AMENDMENT <input type="checkbox"/> Specific Date: _____ <input checked="" type="checkbox"/> Upon filing by the Secretary of State		
ARTICLES OF AMENDMENT WERE ADOPTED BY (Please check ONE of the following) <input type="checkbox"/> Incorporators. Shareholders action was not required <input type="checkbox"/> Board of Directors. Shareholders action was not required <input checked="" type="checkbox"/> Duly approved shareholder action in accordance with Chapter 23B.10 RCW		

AMENDMENTS TO THE ARTICLES OF INCORPORATION ARE AS FOLLOWS
 If amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment must be included. If necessary, attach additional amendments or information.

**Name changed to
 "Belden CDT Networking, Inc."**

SIGNATURE OF OFFICER <i>This document is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.</i>		
Kevin Bloomfield <small>Signature of Officer</small>	Kevin L. Bloomfield <small>Printed Name</small>	1/25/05 <small>Date</small>

INFORMATION AND ASSISTANCE - 360/753-7115 (TDD - 360/753-1455)

006-902 (8/05)