

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
Worthington Cylinder Acquisition, LLC		12/08/2004	LIMITED LIABILITY COMPANY: OHIO
RECEIVING PARTY DATA			
Name:	Worthington Cylinders Wisconsin, LLC		
Street Address:	200 Old Wilson Bridge Road		
City:	Columbus		
State/Country:	OHIO		
Postal Code:	43085		
Entity Type:	LIMITED LIABILITY COMPANY: OHIO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	1993944	WESTERN OUTDOORS	
CORRESPONDENCE DATA			
Fax Number:	(202)533-9033		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	202-467-8810		
Email:	behogue@vssp.com		
Correspondent Name:	Cory M. Amron, Esquire		
Address Line 1:	1828 L Street, NW		
Address Line 2:	11th Floor		
Address Line 4:	Washington, DISTRICT OF COLUMBIA 20036		
ATTORNEY DOCKET NUMBER:	49604-3/0769/WESTERNOUT		
NAME OF SUBMITTER:	Cory M. Amron		
Signature:	/cory m amron/		

CH 1993944 \$40.00

Date:

05/04/2006

Total Attachments: 3

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200434303628

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/09/2004	200434303628	AMEND/ARTICLES- ORGANIZATION/DOM. LLC (LAM)	50.00	100.00	.00	.00	.00

Receipt

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

JONES DAY
ATTN: AMANDA COCHRAN
41 S. HIGH ST., STE.1900
COLUMBUS, OH 43215

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, J. Kenneth Blackwell

1481087

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

WORTHINGTON CYLINDERS WISCONSIN, LLC

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

Document(s):
AMEND/ARTICLES-ORGANIZATION/DOM. LLC

Document No(s):
200434303628



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 8th day of December, A.D. 2004.

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:	
<input checked="" type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input type="radio"/> No	PO Box 1028 Columbus, OH 43216

**Limited Liability Company Certificate of
Amendment / Restatement / Correction**
(Domestic or Foreign)
Filing Fee \$50.00

(CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company <input checked="" type="checkbox"/> Amendment (129-LAM) <input type="checkbox"/> Restatement (142-LRA) <u>August 9, 2004</u> (Date of Organization)	(2) Foreign Limited Liability Company <input type="checkbox"/> Correction (135-LFC) _____ (Home State)	_____ (Qualifying in Ohio on MM/DD/YY)
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The undersigned authorized representative of Worthington Cylinder Acquisition, LLC 1481087
(Name) (Registration Number)

The above stated Limited Liability Company does hereby certify that the undersigned is duly authorized to execute this certificate, and hereby certifies that the above named Limited Liability Company Amend Restate Correct the following:

Complete the information in this section if box (1) Restatement is checked, all sections below must be completed. If box (1) Amendment or box (2) Correction is checked only complete sections that applies.

FIRST: The name of said limited liability company shall be:
Worthington Cylinders Wisconsin, LLC
(the name must include the words "limited liability company", "limited", "Ltd.", "Ltd.", "LLC", or "L.L.C.")

SECOND: (OPTIONAL) This limited liability company shall exist for a period of _____

THIRD: The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is **(OPTIONAL)** :

(street address) **NOTE: P.O. Box Addresses are NOT acceptable.**

(city, township, or village) (state) (zip code)

Please check if additional provisions attached hereto are incorporated herein and made a part of these articles of organization.

FOURTH: Purpose (OPTIONAL)

Complete the information in this section if box (2) is checked and the Limited Liability Company wants to appoint a statutory agent

The limited liability company hereby appoints the following as its agent upon whom process against the limited liability company may be served in the state of Ohio. The name and complete address of the agent is:

(Name)

(Street) **NOTE: P.O. Box Addresses are NOT acceptable.**

(City, village or township) **Ohio** _____
(State) (Zip Code)

The limited liability company irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the OHIO SECRETARY OF STATE if:

- A. the agent cannot be found or,
- B. the limited liability company fails to designate another agent when required to do so, or,
- C. the limited liability company's registration to do business in Ohio expires or is cancelled.

REQUIRED
Must be authenticated (signed)
by an authorized representative
(See Instructions)


Authorized Representative

December 8, 2004
Date

Dale T. Brinkman

(Print Name)

Authorized Representative

Date

(Print Name)

Authorized Representative

Date

(Print Name)

