

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Quality Leadership Center, Inc.		12/03/2004	CORPORATION:
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Prosci, Inc.		
<b>Street Address:</b>	1367 South Garfield		
<b>City:</b>	Loveland		
<b>State/Country:</b>	COLORADO		
<b>Postal Code:</b>	80537		
<b>Entity Type:</b>	CORPORATION:		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
Registration Number:	2022283	PROSCI	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	(303)757-3815		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
<b>Phone:</b>	303-757-3800		
<b>Email:</b>	scott@jbrownlegal.com		
<b>Correspondent Name:</b>	Scott T. Kannady		
<b>Address Line 1:</b>	2000 S Colorado Blvd., Suite 2-610		
<b>Address Line 4:</b>	Denver, COLORADO 80222		
<b>NAME OF SUBMITTER:</b>	Scott T. Kannady		
<b>Signature:</b>	/Scott T. Kannady/		
<b>Date:</b>	11/16/2006		

OP \$40.00 2022283

Total Attachments: 2  
 source=Change of Name#page1.tif



**Document Processing Fee**

If document is on paper: \$25.00  
If document is filed electronically: Currently Not Available

Fees are subject to change.

For electronic filing and to obtain copies of filed documents visit

[www.sos.state.co.us](http://www.sos.state.co.us)

Deliver paper documents to:

Colorado Secretary of State

Business Division

1560 Broadway, Suite 200

Denver, CO 80202-5169

Paper documents must be typed or machine printed.

20041414765 11  
\$ 25.00  
SECRETARY OF STATE  
12-03-2004 16:25:42

ABOVE SPACE FOR OFFICE USE ONLY

**Articles of Amendment**

filed pursuant to §7-90-301, et seq. and §7-110-106 of the Colorado Revised Statutes (C.R.S.)

ID number: 19941119077

1. Entity name:

QUALITY LEADERSHIP CENTER, INC.  
*(If changing the name of the corporation, indicate name BEFORE the name change)*

2. New Entity name:  
(if applicable)

PROSCI, INC.

3. Use of Restricted Words *(if any of these terms are contained in an entity name, true name of an entity, trade name or trademark stated in this document, make the applicable selection):*

- "bank" or "trust" or any derivative thereof
- "credit union"       "savings and loan"
- "insurance", "casualty", "mutual", or "surety"

4. Other amendments, if any, are attached.

5. If the amendment provides for an exchange, reclassification or cancellation of issued shares, the attachment states the provisions for implementing the amendment.

6. If the corporation's period of duration as amended is less than perpetual, state the date on which the period of duration expires:

\_\_\_\_\_  
*(mm/dd/yyyy)*

**OR**

If the corporation's period of duration as amended is perpetual, mark this box:

7. *(Optional)* Delayed effective date: 12/01/04  
*(mm/dd/yyyy)*

**Notice:**

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic

statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

8. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

KAUFMAN	WILLIAM	G	MR
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>
200 E 7TH ST STE 318			
<i>(Street name and number or Post Office information)</i>			
<hr/>			
LOVELAND	CO	80537-4870	
<i>(City)</i>	<i>(State)</i>	<i>(Postal/Zip Code)</i>	
<hr/>		<hr/>	
<i>(Province - if applicable)</i>	<i>(Country - if not US)</i>		

*(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box  and include an attachment stating the name and address of such individuals.)*

**Disclaimer:**

This form, and any related instructions, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While this form is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form. Questions should be addressed to the user's attorney.