

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
ZOMAX OPTICAL MEDIA, INC.		05/03/1999	CORPORATION:
RECEIVING PARTY DATA			
Name:	ZOMAX INCORPORATED		
Street Address:	7001 Discovery Blvd.		
City:	Dublin		
State/Country:	OHIO		
Postal Code:	43017		
Entity Type:	CORPORATION:		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2031517	ZOMAX	
CORRESPONDENCE DATA			
Fax Number:	(561)659-6313		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	5616535000		
Email:	peter.chiabotti@akerman.com		
Correspondent Name:	Peter A. Chiabotti		
Address Line 1:	222 Lakeview Avenue		
Address Line 2:	Suite 400		
Address Line 4:	West Palm Beach, FLORIDA 33401-6183		
ATTORNEY DOCKET NUMBER:	ZOMAX		
NAME OF SUBMITTER:	Peter A. Chiabotti		
Signature:	/Peter A. Chiabotti/		
Date:	05/06/2008		

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Total Attachments: 2
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ARTICLES OF AMENDMENT OF ARTICLES OF INCORPORATION
OF
ZOMAX OPTICAL MEDIA, INC.

Pursuant to the provisions of Minnesota Statutes, Section 302A.135, the following amendment to the Articles of Incorporation of Zomax Optical Media, Inc., amending and restating Section 1.1 of Article 1 in its entirety, was duly adopted by the shareholders of the corporation on May 3, 1999:

1.1) The name of the corporation is Zomax Incorporated. *J*

The undersigned swears that the foregoing is true and accurate and that the undersigned has the authority to sign this document on behalf of the corporation.

Dated: May 3, 1999

James T. Anderson
James T. Anderson
President and Chief Executive Officer

2250783-1

STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED

MAY-05 1999

Henry H. Johnson
Secretary of State

014612

Corp. Reg. No. RN-25940

05/05/99

12:58

STATE OF MINNESOTA
DEPARTMENT OF STATE
I hereby certify that this is a true and complete copy of the document as filed for record in this office.
DATED _____
Henry H. Johnson

STATE OF MINNESOTA

DEPARTMENT OF STATE

I hereby certify that this is a true and complete copy of the document as filed for record in this office.

DATED 5/1/08

Mark Ritchie

Secretary of State



By

[Signature]