

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
Rex Commercial Tools and Fasteners, LLC		07/01/2008	LIMITED LIABILITY COMPANY:
RECEIVING PARTY DATA			
Name:	TyRex, LLC		
Street Address:	8485 Broadwell Road		
City:	Cincinnati		
State/Country:	OHIO		
Postal Code:	45244		
Entity Type:	LIMITED LIABILITY COMPANY:		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	2452141	DURASPIN	
Registration Number:	3442821	TYREX	
CORRESPONDENCE DATA			
Fax Number:	(513)762-7946		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	(513) 455-7646		
Email:	kkg@gdm.com		
Correspondent Name:	Karen Kreider Gaunt		
Address Line 1:	255 East Fifth Street		
Address Line 2:	2900 Chemed Center		
Address Line 4:	Cincinnati, OHIO 45202		
ATTORNEY DOCKET NUMBER:	104003.186		
NAME OF SUBMITTER:	Karen Kreider Gaunt		
Signature:	/karen kreider gaunt/		

CH \$65.00 2452141

Date:

07/14/2008

Total Attachments: 2

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Prescribed by:

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

Expedite this Form: (Select One)	
Mail Form to one of the Following:	
<input checked="" type="radio"/> Expedite	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input type="radio"/> Non Expedite	PO Box 1329 Columbus, OH 43216

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

**Domestic Limited Liability Company Certificate of
Amendment or Restatement
Filing Fee \$50.00**

(CHECK ONLY ONE (1) BOX)

<p>(1) Domestic Limited Liability Company</p> <p><input checked="" type="checkbox"/> Amendment (129-LAM)</p> <p><u>2/15/2005</u> Date of Formation</p>	<p>(2) Domestic Limited Liability Company</p> <p><input type="checkbox"/> Restatement (142-LRA)</p> <p>_____ Date of Formation</p>
<p>The undersigned authorized representative of:</p> <p><u>Rex Commercial Tools and Fasteners, LLC</u> <u>1518974</u> Name of limited liability company Registration number</p>	

If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

The name of said limited liability company shall be:

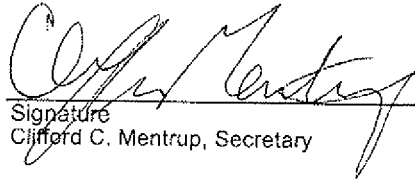
TyRex, LLC
Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Ltd." or "Ltd"

This limited liability company shall exist for a period of: _____
Period of Existence

Purpose

Check here if additional provisions are attached

REQUIRED
Must be (signed) by a
member, manager or
other representative.



Signature
Clifford C. Mentrup, Secretary

July 1, 2008

Date

Print Name

Signature

Date

Print Name

Signature

Date

Print Name