

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
ECHOSTAR SATELLITE L.L.C.		02/29/2008	LIMITED LIABILITY COMPANY:
RECEIVING PARTY DATA			
Name:	DISH NETWORK L.L.C.		
Street Address:	9601 S. Meridian Blvd.		
Internal Address:	Legal Department		
City:	Englewood		
State/Country:	COLORADO		
Postal Code:	80112		
Entity Type:	LIMITED LIABILITY COMPANY:		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Serial Number:	77166936	DISH UNIVERSITY	
Serial Number:	77171792	DISH U	
Serial Number:	77168152	DISHMARKETINGSOLUTIONS	
CORRESPONDENCE DATA			
Fax Number:	(303)723-3172		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	720.514.5310		
Email:	aaron1.dobberstein@echostar.com		
Correspondent Name:	Aaron Dobberstein		
Address Line 1:	9601 S. Meridian Blvd.		
Address Line 2:	Legal Department		
Address Line 4:	Englewood, COLORADO 80112		
ATTORNEY DOCKET NUMBER:	TM-		

CH \$90.00 77166936

NAME OF SUBMITTER:	Aaron Dobberstein
Signature:	/Aaron Dobberstein/
Date:	12/17/2008
Total Attachments: 3 source=Name change from Echostar Satellite LLC to Dish Network LLC#page1.tif source=Name change from Echostar Satellite LLC to Dish Network LLC#page2.tif source=Name change from Echostar Satellite LLC to Dish Network LLC#page3.tif	



Colorado Secretary of State
 Date and Time: 02/29/2008 03:11 PM
 Id Number: 19871717631
 Document number: 20081120311

Document processing fee
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Articles of Amendment

filed pursuant to §7-90-301, et seq. and §7-80-209 of the Colorado Revised Statutes (C.R.S.)

ID number: 19871717631

1. Entity name: ECHOSTAR SATELLITE L.L.C.
(If changing the name of the limited liability company, indicate name BEFORE the name change)

2. New Entity name: DISH Network L.L.C.
 (if applicable)

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, mark the applicable box):*

"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 limited liability company'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 limited liability company's period of duration as amended is perpetual, mark this box:

6. (Optional) Delayed effective date: _____
(mm/dd/yyyy)

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

Strickland Tracy A.
(Last) (First) (Middle) (Suffix)

P.O. Box 6655
(Street name and number or Post Office Box information)

Englewood CO 80155
(City) (State) (Postal/Zip Code)

United States
(Country - if not US)

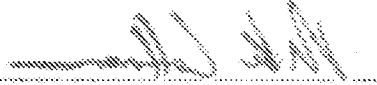
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STATE OF COLORADO
DEPARTMENT OF STATE

I hereby certify that this is a true copy of
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Secretary of State

Date _____





STATE OF COLORADO
DEPARTMENT OF STATE

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of the Secretary of State.

Mike Coffman
Secretary of State

Carolyne Smith 11/16/2008
By Date