

Form PTO-1594
(Rev. 10/02)
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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
Aerove Industries, Inc.

- Individual(s)
- General Partnership
- Corporation-State **Nevada**
- Other _____
- Association
- Limited Partnership

Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

Execution Date: **March 13, 2002**

2. Name and address of receiving party(ies)

Name: **Aerove Industries Incorporated**

Internal Address: _____
Address: _____

Street Address: **P.O. Box 485**

City: **Gardnerville** State: **NV** Zip: **89410**

- Individual(s) citizenship _____
- Association _____
- General Partnership _____
- Limited Partnership _____
- Corporation-State **Nevada**
- Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)
Additional name(s) & address(es) attached? Yes No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s) **2,242,836**

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **Mark C. Jacobs, Esq.**

Internal Address: _____

Street Address: **3033 El Camino Avenue**

City: **Sacramento** State: **California** Zip: **95821**

6. Total number of applications and registrations involved: _____

1

7. Total fee (37 CFR 3.41).....\$ **40.00**

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: _____

(Attach duplicate copy of this page if paying by deposit account)

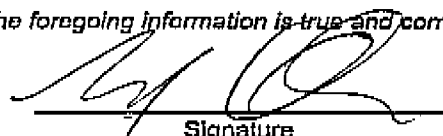
DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Mark C. Jacobs

Name of Person Signing

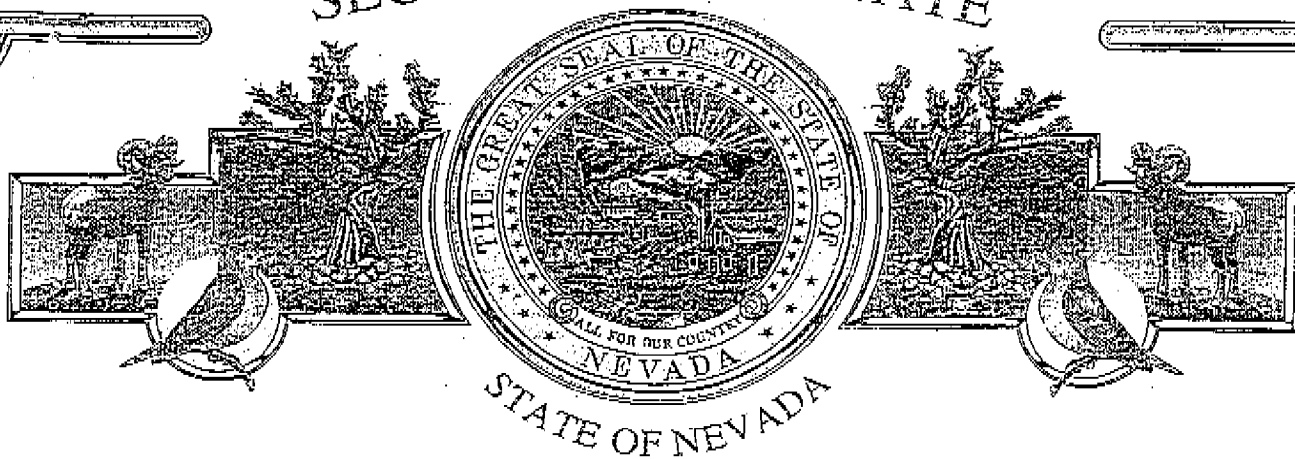

Signature

May 17 2004
Date

Total number of pages (including cover sheet, attachments, and document)

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
P.O. Box 1450, Alexandria, VA 22313-1450

SECRETARY OF STATE



CERTIFICATE OF NAME CHANGE

I, DEAN HELLER, the duly qualified and elected Nevada Secretary of State, do hereby certify that on **March 13, 2002**, a Certificate of Amendment to its Articles of **Incorporation** changing the name to **AERVOE INDUSTRIES INCORPORATED** was filed in this office by **AERVOE PACIFIC COMPANY, INC.** Said change of name has been made in accordance with the laws of the State of Nevada and that said Certificate of Amendment is now on file and of record in this office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on May 22, 2002.



DEAN HELLER
Secretary of State

By

Certification Clerk

TRADEMARK