

### RECORDATION FORM COVER SHEET TRADEMARKS ONLY

Atty. Reference:  
JN4189US (90664)

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

**1. Name of conveying party(ies):**

Duramax, Inc.

- Individual(s)
- General Partnership
- Corporation- State: Ohio
- Other \_\_\_\_\_

- Association
- Limited Partnership

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached?  Yes  No

**2. Name and address of receiving party(ies)**

Additional names, addresses, or citizenship attached?  Yes  No

Name: Johnsonite Inc.

Internal \_\_\_\_\_

Address: \_\_\_\_\_

Street Address: 16910 Munn Road

City: Chagrin Falls

State: Ohio

Country: U.S.A. Zip: 44023

- Association Citizenship \_\_\_\_\_
- General Partnership Citizenship \_\_\_\_\_
- Limited Partnership Citizenship \_\_\_\_\_
- Corporation Citizenship Ohio
- Other \_\_\_\_\_ Citizenship \_\_\_\_\_

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)

**3. Nature of conveyance /Execution Date(s) :**

Execution Date(s) December 6, 2005

- Assignment
- Security Agreement
- Other \_\_\_\_\_
- Merger
- Change of Name

**4. Application number(s) or registration number(s) and identification or description of the Trademark.**

A. Trademark Application No.(s)

78/790,437

B. Trademark Registration No.(s)

Additional sheet(s) attached?  Yes  No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

PROMINENT

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

Name: D. Peter Hochberg, Esq.

Internal Address: D. Peter Hochberg Co., L.P.A.

Street Address: 1940 East 6th Street - 6th F

City: Cleveland

State: Ohio Zip: 44114

Phone Number: 216-771-3800

Fax Number: 216-771-3804

Email Address: dphdocket@aol.com

**6. Total number of applications and registrations involved:**

1

**7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00---**

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

**8. Payment Information:**

a. Credit Card Last 4 Numbers 2001  
Expiration Date 05/2008

b. Deposit Account Number 08-2441

Authorized User Name D. Peter Hochberg

**9. Signature:**

Signature

May 26, 2006

Date

SEAN MELLINO

Name of Person Signing

Total number of pages including cover sheet, attachments, and document:

10

OP \$40.00 78790437

Doc ID --> 200534300240



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/09/2005	200534300240	MERGER/DOMESTIC (MER)	125.00	100.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

CORPORATION SERVICE COMPANY  
ATTN: LISA VAIDO  
887 SOUTH HIGH STREET  
COLUMBUS, OH 43206

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

12785

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**JOHNSONITE INC**

and, that said business records show the filing and recording of:

Document(s)

**MERGER/DOMESTIC**

Document No(s):

**200534300240**



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of  
the Secretary of State at Columbus,  
Ohio this 8th day of December,  
A.D. 2005.

*J. Kenneth Blackwell*  
Ohio Secretary of State

Doc ID --&gt; 200534300240

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/09/2005	200534300240	MERGED OUT OF EXISTENCE (MEX)	.00	.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

CORPORATION SERVICE COMPANY  
 ATTN: LISA VAIDO  
 887 SOUTH HIGH STREET  
 COLUMBUS, OH 43206

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

1582668

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**TARKETT ACQUISITION CORPORATION**

and, that said business records show the filing and recording of:

Document(s)  
**MERGED OUT OF EXISTENCE**

Document No(s):  
**200534300240**



United States of America  
 State of Ohio  
 Office of the Secretary of State

Witness my hand and the seal of  
 the Secretary of State at Columbus,  
 Ohio this 8th day of December,  
 A.D. 2005.

*J. Kenneth Blackwell*  
 Ohio Secretary of State

Dec. 6. 2005 7:21PM TARKETT 514-362-9080 #2404 P. 2



Prescribed by **J. Kenneth Blackwell**  
Ohio Secretary of State  
Columbus, Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite this Form: (When Due)	
<input checked="" type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 — Requires an additional fee of \$100 —
<input type="radio"/> No	PO Box 132B Columbus, OH 43216

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

**CERTIFICATE OF MERGER**  
(For Domestic or Foreign, Profit or Non-Profit)  
Filing Fee \$125.00  
*(150-0000)*

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan, limited liability companies, limited partnerships and/or partnerships with limited liability, desiring to effect a merger, set forth the following facts:

**I. SURVIVING ENTITY**

A. The name of the entity surviving the merger is:

DURAMAX INC

B. Name Change: As a result of this merger, the name of the surviving entity has been changed to the following:

JOHNSONITE INC

*(Complete only if name of surviving entity is changing through the merger)*

C. The surviving entity is: *(Please check the appropriate box and fill in the appropriate blanks)*

- Domestic (Ohio) For-Profit Corporation, charter number 12785
- Domestic (Ohio) Non-Profit Corporation, charter number \_\_\_\_\_
- Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of \_\_\_\_\_ and licensed to transact business in the State of Ohio under license number \_\_\_\_\_
- Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of \_\_\_\_\_ and NOT licensed to transact business in the state of Ohio, \_\_\_\_\_
- Domestic (Ohio) Limited Liability Company, with registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of \_\_\_\_\_ and registered to do business in the State of Ohio under registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of \_\_\_\_\_ and NOT registered to do business in the State of Ohio, \_\_\_\_\_
- Domestic (Ohio) Limited Partnership, with registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Partnership organized under the laws of the state/country of \_\_\_\_\_ and registered to do business in the state of Ohio under registration number \_\_\_\_\_

Dec. 6. 2005 7:21PM TARKETT 514-362-9080

N92404 P. 3

- Foreign (Non-Ohio) Limited Partnership organized under the laws of the state/country of \_\_\_\_\_ and NOT registered to do business in the state of Ohio.
- Domestic (Ohio) Partnership having limited liability, with the registration number \_\_\_\_\_
- Foreign (Non-Ohio) Partnership having limited liability organized under the laws of the state/country of \_\_\_\_\_ and registered to do business in the state of Ohio under registration number: \_\_\_\_\_
- Foreign (Non-Ohio) Non-Profit incorporation under the laws of the state/country of \_\_\_\_\_ and licensed to transact business in the state of Ohio under license number \_\_\_\_\_
- Foreign (Non-Ohio) Non-Profit incorporation under the laws of the state/country of \_\_\_\_\_ and not licensed to transact business in the state of Ohio.
- General partnership not registered with the state of Ohio

II. MERGING ENTITY

The name, charter/license/registration number, type of entity, state/country of incorporation or organization, respectively, of which is the entities merging out of existence are as follows: (If this is insufficient space to reflect all merging entities, please attach a separate sheet listing the merging entities)

Name / charter, license or registration number	State/Country of Organization	Type of Entity
TARKETT ACQUISITION CORPORATION 1582668	OH	FOR PROFIT

III. MERGER AGREEMENT ON FILE

The name and mailing address of the person or entity from whom/which eligible persons may obtain a copy of the agreement of merger upon written request:

SOUER AAR 1001 YAMASKA EAST ST  
(name) (street) NOTE: P.O. Box Addresses are NOT acceptable.

FARMHAM OURSEC JEN 1J7  
(city, village or township) (state) (zip code)

IV. EFFECTIVE DATE OF MERGER

This merger is to be effective on: 12/08/2005 (If a date is specified, the date must be a date on or after the date of filing; the effective date of the merger cannot be earlier than the date of filing, if no date is specified, the date of filing will be the effective date of the merger).

V. MERGER AUTHORIZED

The laws of the state or country under which each constituent entity exists, permits this merger. This merger was adopted, approved and authorized by each of the constituent entities in compliance with the laws of the state under which it is organized, and the persons signing this certificate on behalf of each of the constituent entities are duly authorized to do so.

Dec. 6. 2005 7:22PM TARKETT 514-362-9080

Nº2404 P. 4

**VI. STATUTORY AGENT**

The name and address of the surviving entity's statutory agent upon whom any process, notice or demand may be served is:

(name) \_\_\_\_\_ (street) **NOTE: P.O. Box Addresses are NOT acceptable.**  
\_\_\_\_\_, Ohio  
(city, village or township) (zip code)

(This item **MUST** be completed if the surviving entity is a foreign entity which is not licensed, registered or otherwise authorized to conduct business in the state of Ohio)

**VII. ACCEPTANCE OF AGENT**

The undersigned, named herein as the statutory agent for the above referenced surviving entity, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature of Agent \_\_\_\_\_

(The acceptance of agent must be completed by the surviving entities if through this merger the statutory agent has changed, or the named agent differs in any way from the name currently on record with the Secretary of State.)

**VIII. STATEMENT OF MERGER**

Upon filing, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed surviving entity

**IX. AMENDMENTS**

The articles of incorporation, articles of organization, certificate of limited partnership or registration of partnership having limited liability (choose appropriate term) of the surviving domestic entity have been amended.  
 Attachments are provided  No Changes

**X. QUALIFICATION OR LICENSURE OF FOREIGN SURVIVING ENTITY**

A. The listed surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability declines to transact business in Ohio as a foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability, and hereby appoints the following as its statutory agent upon whom process, notice or demand against the entity may be served in the state of Ohio. The name and complete address of the statutory agent is:

(name) \_\_\_\_\_ (street) **NOTE: P.O. Box Addresses are NOT acceptable.**  
\_\_\_\_\_, Ohio  
(city, village or township) (zip code)

The subject surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability irrevocably consents to service of process on the statutory agent listed above as long as the authority of the agent continues, and to service of process upon the Secretary of State of Ohio if the agent cannot be found, if the corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability fails to designate another agent when required to do so, or if the foreign corporation's, bank's, savings bank's, savings and loan's, limited liability company's, limited partnership's or partnership having limited liability's license or registration to do business on Ohio expires or is canceled.

Dec. 6. 2005 7:22PM TARKETT 514-362-9080

Nº2404 P. 5

The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below.

<u>TARKETT ACQUISITION CORPORATION</u> (Exact name of entity)	<u>DURAMAX INC</u> (Exact name of entity)
By: <u>Jacques S. [Signature]</u>	By: <u>[Signature]</u>
Title: <u>President &amp; Treasurer</u>	Title: <u>VP &amp; CFO</u>
Date: <u>12/06/2005</u>	Date: <u>12/06/2005</u>

_____ (Exact name of entity)	_____ (Exact name of entity)
By: _____	By: _____
Title: _____	Title: _____
Date: _____	Date: _____

_____ (Exact name of entity)	_____ (Exact name of entity)
By: _____	By: _____
Title: _____	Title: _____
Date: _____	Date: _____

_____ (Exact name of entity)	_____ (Exact name of entity)
By: _____	By: _____
Title: _____	Title: _____
Date: _____	Date: _____

_____ (Exact name of entity)	_____ (Exact name of entity)
By: _____	By: _____
Title: _____	Title: _____
Date: _____	Date: _____

Dec. 6. 2005 7:22PM TARKETT 514-362-9080

№2404 P. 6



Prescribed by **J. Kenneth Blackwell**

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

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

Expedite this Form: (check One)	
<input checked="" type="radio"/> Yes	PO Box 1390 Columbus, OH 43218 ~ Require an additional fee of \$100 ~
<input type="radio"/> No	PO Box 1028 Columbus, OH 43216

**Certificate of Amendment by Shareholders or Members (Domestic)**  
Filing Fee \$50.00

**(CHECK ONLY ONE (1) BOX)**

<b>(1) Domestic for Profit</b>		<b>(2) Domestic Non-Profit</b>	
<input type="checkbox"/> Amended (122-AMAP)	<input checked="" type="checkbox"/> Amendment (125-AMDS)	<input type="checkbox"/> Amended (126-AMAN)	<input type="checkbox"/> Amendment (128-AMD)

Complete the general information in this section for the box checked above.

Name of Corporation: JOHNSONITE INC

Charter Number: 12785

Name of Officer: SOUHA AZAR

Title: ASSISTANT SECRETARY

Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

A meeting of the  shareholders  directors ( non-profit amended articles only)

members was duly called and held on \_\_\_\_\_ (Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise \_\_\_\_\_ % as the voting power of the corporation.

In a writing signed by all of the  shareholders  directors (non-profit amended articles only)

members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.



Dec. 6. 2005 7:22PM TARKETT 514-362-9080

Nº2404 P. 7

All of the following information must be completed if an amended box is checked. If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: \_\_\_\_\_

SECOND: The place in the State of Ohio where its principal office is located is in the City of: \_\_\_\_\_  
(city, village or township) (county)

THIRD: The purposes of the corporation are as follows:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FOURTH: The number of shares which the corporation is authorized to have outstanding is: 1500common No value  
(Does not apply to box (2))

**REQUIRED**  
 Must be authenticated  
 (signed) by an authorized  
 representative  
 (See instructions)

\_\_\_\_\_  
 Authorized Representative

12/08/2005  
 Date

SOUHA AZAR  
(Print Name)

\_\_\_\_\_  
 Authorized Representative

\_\_\_\_\_  
 Date

\_\_\_\_\_  
(Print Name)