

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
Cow Co		03/26/2008	CORPORATION: OREGON
RECEIVING PARTY DATA			
Name:	Betty Rides Inc.		
Street Address:	216 NE 28th Avenue		
City:	Portland		
State/Country:	OREGON		
Postal Code:	97232		
Entity Type:	CORPORATION: OREGON		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3381169	BETTY RIDES	
CORRESPONDENCE DATA			
Fax Number:	(503)595-5301		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	5035955300		
Email:	ptotmdocket@klarquist.com		
Correspondent Name:	Ramon A. Klitzke II		
Address Line 1:	121 SW Salmon Street		
Address Line 2:	One World Trade Center, Suite 1600		
Address Line 4:	Portland, OREGON 97204		
ATTORNEY DOCKET NUMBER:	7878-78968-01/RAK		
NAME OF SUBMITTER:	Ramon A. Klitzke II		
Signature:	/ramon a. klitzke II/		
Date:	06/04/2008		

CH \$40.00 3381169

Total Attachments: 2
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source=betty rides aanc#page2.tif

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, **BILL BRADBURY**, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

That the attached copy of the

**Articles of
Amendment**

filed on
March 26, 2008

for
COW CO

changing the name to
BETTY RIDES INC.

is a true copy of the original document
that has been filed with this office.



In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.

BILL BRADBURY, Secretary of State

By Debra L. Virag
Debra L. Virag
May 22, 2008



Phone: (503) 986-2200
 Fax: (503) 378-4381

Articles of Amendment—Business/Professional/Nonprofit

Secretary of State
 Corporation Division
 255 Capitol St. NE, Suite 151
 Salem, OR 97310-1327
 FilingInOregon.com

Check the appropriate box below:

- BUSINESS/PROFESSIONAL CORPORATION
 (Complete only 1, 2, 3, 4, 6, 7)
 NONPROFIT CORPORATION
 (Complete only 1, 2, 3, 5, 6, 7)

FILED

MAR 26 2008

OREGON
 SECRETARY OF STATE

REGISTRY NUMBER: 376849-82

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in **Black Ink**.

1) ENTITY NAME: COW CO

2) STATE THE ARTICLE NUMBER(S) AND SET FORTH THE ARTICLE(S) AS IT IS AMENDED TO READ. (Attach a separate sheet if necessary.)

Article 1. The name of this corporation is Betty Rides Inc.

3) THE AMENDMENT WAS ADOPTED ON: March 25, 2008

(If more than one amendment was adopted, identify the date of adoption of each amendment.)

BUSINESS/PROFESSIONAL CORPORATION ONLY

4) CHECK THE APPROPRIATE STATEMENT

Shareholder action was required to adopt the amendment(s). The vote was as follows:

Class or series of shares	Number of shares outstanding	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST
COM	100	100	100	0

Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.

The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

NONPROFIT CORPORATION ONLY

5) CHECK THE APPROPRIATE STATEMENT

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required. The membership vote was as follows:

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

6) EXECUTION

Signature

Printed Name

Title

Janet Freeman Janet Freeman

President

7) CONTACT NAME (To resolve questions with this filing.)

Brett S. Carson

DAYTIME PHONE NUMBER (Include area code.)

(503) 288-9291

FEES

Required Processing Fee \$50

No Fee for Nonprofit Type Change Only

Confirmation Copy (Optional) \$5

Processing Fees are nonrefundable.

Please make check payable to "Corporation Division."

NOTE:

Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.