JL-11 01 00:04 FROM: 603-885-2167 TO:87033065995 PAGE:02/05

RECORDATION FORM COVER SHEET PATENTS ONLY  TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).  SUBMISSION TYPE    New	FORM PTO-1619A Expures 06/30/29 OMB 0651-0027			U.S. DEPARTMENT OF COMMERCE Parent and Trademark Office PATENT	֧֓֟֟֝֟֟֟ <u>֟</u>			
TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).  SUBMISSION TYPE    New								
New	PATENTS ONLY  PATENTS ONLY  Property of Patents and Trademarks: Please record the attached original document(s) or copy(ies).							
Resubmission (Non-Recordation)								
Resubmission (Non-Recordation) Document ID# Correction of PTO Error Reel #			Assignment	Security Agreement				
Document ID#	l <del></del>			Change of Name				
Correction of PTO Error   Recl #   Frame#	Document ID#		Merger	Other				
Corrective Document Reel # Frame#  Conveying Party(ies)  Mark if additional names of conveying parties attached Execution Date Month Day Year Ol 28 1996  Name (line 1) SANDERS ASSOCIATES, INC.  Name (line 2) a Delaware, U.S., Corporation  Second Party Name (line 1) Name (line 2)  Receiving Party  Mark if additional names of receiving party attached if a decument to be recorded is un assignment and the receiving party attached  If a decument to be recorded is un assignment and the receiving party attached  Address (line 1) PO Box 868 NHQ1-719  Address (line 2) 65 Spit Brook Road  Address (line 3) Nashua NH 03060 City State/County Zip Code  Domestic Representative Name and Address  Pater for the first Receiving Party only.  Name  Address (line 1)				U.S. Government				
Corveying Party(ies)								
Name (line 1) SANDERS ASSOCIATES, INC.  Name (line 2) a Delaware, U.S., Corporation  Second Party Name (line 1)  Name (line 2)  Receiving Party  Mark if additional names of receiving party attached  Name (line 1)  Name (line 2)  A Delaware, U.S., Corporation  If a document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment)  Address (line 2) 65 Spit Brook Road  Address (line 3) Nashua NH 03060  City State/Country Zip Code  Domestic Representative Name and Address  Enter for the first Receiving Party only.  Name  Address (line 1)								
Name (line 1) SANDERS ASSOCIATES, INC.  Name (line 2) a Delaware, U.S., Corporation  Second Party Name (line 1)  Name (line 2)  Receiving Party	Conveying Party(jes) Mark if additional names of conveying parties attached							
Name (line 2)  Second Party Name (line 1)  Name (line 2)  Receiving Party    Mark if additional names of receiving party attached   If a document to be recorded is un assignment and the receiving party is not domicised in the United States, an appointment   Address (line 1)   PO Box 868 NHQ1-719   PO Box 868 NHQ1-719   PO Box 868 NHQ1-719     Address (line 2)   65 Spit Brook Road   Address (line 3)   Nashua   NH   03060     City   State/Country   Zip Code     Domestic Representative Name and Address   Enter for the first Receiving Party only.   Name   Address (line 1)	St . (85-1)	SAMOEDS ASSOCIA	TES INC					
Second Party Name (line 1) Name (line 2)  Receiving Party    Mark if additional names of receiving party attached is an assignment and the receiving party is not demicised in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment)  Address (line 2) 65 Spit Brook Road  Address (line 3) Nashua NH 03060  City State/Country Zip Code  Domestic Representative Name and Address  Enter for the first Receiving Party only.  Name  Address (line 1)		SANDERS ASSOCIATES, INC.						
Name (line 1) Name (line 2)  Receiving Party    Mark if additional names of receiving party attached   Name (line 1)   LOCKHEED SANDERS, INC.   if a document to be recorded is an assignment and the receiving party is not domicibed in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment)  Address (line 2)   65 Spit Brook Road   Address (line 3)   Nashua   NH   03060     City   State/Country   Zip Code     Domestic Representative Name and Address   Enter for the first Receiving Party only.  Name   Address (line 1)	<u>L.                                    </u>							
Receiving Party    Mark if additional names of receiving party attached								
Name (line 1) LOCKHEED SANDERS, INC.  Name (line 2) A Delaware, U.S., Corporation  Address (line 1) PO Box 868 NHQ1-719  Address (line 2) 65 Spit Brook Road  Address (line 3) Nashua NH 03060  City State/Country Zip Code  Domestic Representative Name and Address  Patter for the first Receiving Party only.  Name  Address (line 1)	Name (line 2)							
Name (line 1)  Name (line 2)  A Delaware, U.S., Corporation  Address (line 1)  PO Box 868 NHQ1-719  Address (line 2)  Address (line 3)  Nashua  NH  O3060  City  State/Country  State/Country  Pomestic Representative Name and Address  Enter for the first Receiving Party only.  Name  Address (line 1)	Receiving Party	Mark if additional names of receiving party attached						
Name (line 2) A Delaware, U.S., Corporation domicised in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment)  Address (line 2) 65 Spit Brook Road  Address (line 3) Nashua NH 03060  City State/Country Zip Code  Domestic Representative Name and Address  Enter for the first Receiving Party only.  Name  Address (line 1)	Name (line1)	LOCKHEED SANDERS, INC.						
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Public burden reporting for this collection of information is estimated to oversige approximately 50 minutes per Cover Sheet to be recorded, inleuding time for reviewing the document and gathering the data mendel to complete the Cover Sheet. Send administry regarding this burden estimate to the U.S. Patent and Trialement Office, Cluef Information Officer, Washington, DC 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Programme Reduction Project (0651-0027), Washington, S.C. 20303. Sec OMB Information Collection Budget Package 0651-0027, Patent and Trialemark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

MAIL documents to be recorded with required cover sheet(s) information to: Commissioner of Patents and Trademarks, Box Assignments, Washington, DC 20231

FORM PTO-161 (Expires 06/30/99 OMB 0651-0027		Page 2	U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office PATENT				
Correspondent	Name and Address	Area Code and Telephone Number	603.885.2642				
Name [	Name Vernon C. Maine or Scott J. Asmus						
Address (line 1)	BAE SYSTEMS						
Address (line 2)	Patent Department - NHQ1-719						
Address (line 3)	PO Box 868						
Address (line 4)	114411441214						
Pages	Enter the total number of pag Including any attachments.		#				
Application Number(s)							
Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).							
Patent Application Number(s) Patent Number(s)							
05543295							
If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.							
Patent Cooperation Treaty (PCT)							
Enter PC	CT application number	PCT PCT	PCT				
only if a has not b	U.S. Application Number been assigned	PCT PCT	PCT				
Number of Properties  Enter the total number of properties involved # 1							
Fee Amount	Fee An	nount for Properties Listed (37 CFR 3.41):	\$ 40.00				
Method of		Enclosed Deposit Account					
Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.)  Deposit Account Number: # 190130							
		Deposit Account Number: Authorization to charge additional fees:	# 190130 1				
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. Charges to deposit account are authorized, as indicated herein.							
	C. Maine or Scott J. Asm	ous Scott / Um	10 July 2001				
Name of Person Signing Signature Date/							

## CERTIFICATE OF AMENDMENT

OF

## RESTATED CERTIFICATE OF INCORPORATION

Half Charles

Sanders Associates, Inc., a corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware, DOES HEREBY CERTIFY:

FIRST: That the Board of Directors of said corporation by the unanimous written consent of its members, adopted a resolution proposing and declaring advisable the following amendment to the Restated Certificate of Incorporation of said corporation:

RESOLVED, that the Restated Certificate of Incorporation of Sanders Associates, Inc. be amended by changing the First Article thereof so that, as amended, said Article shall be and read as follows:

"FIRST: The name of the Corporation is Lockheed Sanders, Inc. (hereinafter the "Corporation")."

SECOND: That in lieu of a meeting and vote of stockholders, the stockholders have given unanimous written consent to said amendment in accordance with the provisions of section 228 of the General Corporation Law of the State of Delaware.

THIRD: That the aforesaid amendment was duly adopted in accordance with the applicable provisions of sections 242 and 228 of the General Corporation Law.

IN WITNESS WHEREOF, said Sanders Associates, Inc. has caused this certificate to be signed by John R. Kreick its President, and attested by Norman J. Marsh, Jr., its Assistant Secretary this q+1 day of January, 1990.

Bv:

John R. Kreick

President

ATTEST:

By:

Norman J. Marsh, Jr.

Assistant Secretary

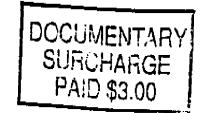
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state of melaware





JAN 16 1990

RECEIVED FOR RECORD

ELYN T. ALEMAR, Recorder

## Office of Secretary of State

I, MICHAEL HARKINS, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF SANDERS ASSOCIATES, INC.
FILED IN THIS OFFICE ON THE ELEVENTH DAY OF JANUARY, A.D. 1990,
AT 10 O'CLOCK A.M.

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730011004

Michael Harkins, Secretary of State

AUTHENTICATION:

12493679

DATE:

01/11/1990

PATENT REEL: 011731 FRAME: 0228

**RECORDED: 07/11/2001**