

10-19-2001



101880215

10-9-01

**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

Resubmission (Non-Recordation)
Document ID#

Correction of PTO Error
Reel # Frame #

Corrective Document
Reel # Frame #

Conveyance Type

Assignment Security Agreement

License Change of Name

Merger Other

U.S. Government
(For Use ONLY by U.S. Government Agencies)

Departmental File Secret File

Conveying Party(ies)

Mark if additional names of conveying parties attached

Name (line 1) Execution Date
Month Day Year

Second Party

Name (line 1)

Name (line 2)

Execution Date
Month Day Year

Receiving Party

Mark if additional names of receiving parties attached

Name (line 1)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)
City State/Country Zip Code

If 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.)

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

10/18/2001 DBYRNE 00000090 4638743

FOR OFFICE USE ONLY

01 FC:581

200.00 DR

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark 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, D.C. 20231

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages Enter the total number of pages of the attached conveyance document including any attachments. #

Application Number(s) or Patent Number(s) Mark if additional numbers attached

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)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="4638743"/>	<input type="text" value="4423896"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="4683678"/>	<input type="text" value="4439076"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="4920894"/>	<input type="text"/>	<input type="text"/>

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. Month Day Year

Patent Cooperation Treaty (PCT)

Enter PCT application number only if a U.S. Application Number has not been assigned.

PCT PCT PCT
PCT PCT PCT

Number of Properties Enter the total number of properties involved. #

Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed Deposit Account Voucher #: 684299

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

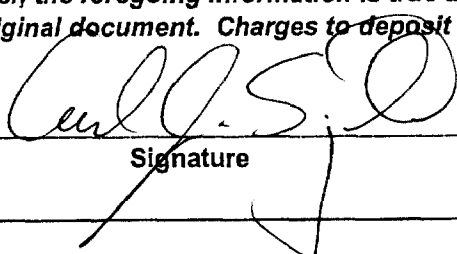
Deposit Account Number: #

Authorization to charge additional fees: Yes No

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.

Carl J. Sjulín, attorney for
Name of Person Signing assignee

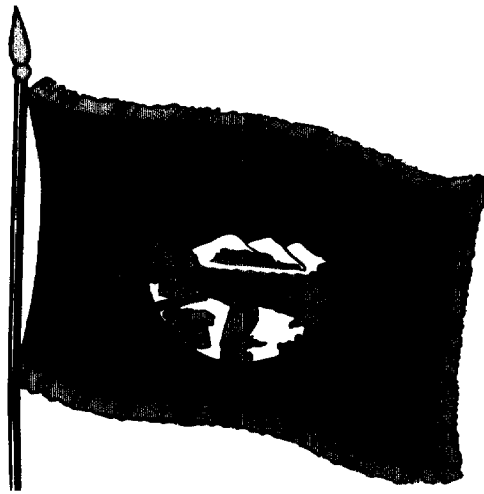


Signature

10-3-01
Date

STATE OF

NEBRASKA



United States of America,
State of Nebraska } ss.

Department of State
Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

**the attached is a true and correct copy of Articles of Amendment to
the Articles of Incorporation of**

CHIEF TRANSPORTATION, INC.

changing the corporate name to

CHIEF TRANSPORTATION PRODUCTS, INC.

**with registered office located in GRAND ISLAND, Nebraska, as filed
in this office on July 3, 2001.**

In Testimony Whereof,

**I have hereunto set my hand and
affixed the Great Seal of the State
of Nebraska on September 14, in
the year of our Lord, two thousand
one.**



John A. Gale
SECRETARY OF STATE



1000227245 Pgs. 1
CHIEF TRANSPORTATION PRODUCTS,
Filed: 07/03/2001 11 10 AM

**ARTICLES OF AMENDMENT
TO THE ARTICLES OF INCORPORATION OF
CHIEF TRANSPORTATION, INC.**

Chief Transportation, Inc. (the "Corporation") acting by and through its Board of Directors and sole shareholder adopts the following amendment to its Articles of Incorporation:

1. The name of the Corporation prior to the adoption of this amendment is "Chief Transportation, Inc."
2. The name of the Corporation shall be changed to "Chief Transportation Products, Inc."
3. The foregoing amendment was adopted by action of the Board of Directors and the sole shareholder of the Corporation on June 26, 2001.
4. At the time of adoption of this amendment, the Corporation had a single class of common stock, one thousand (1000) shares were issued and outstanding, and all issued and outstanding shares were voted in favor of the amendment.

Dated as of June 26, 2001.

CHIEF TRANSPORTATION PRODUCTS, INC.,
formerly known as Chief Transportation, Inc.

By

President/Chief Executive Officer

Attest:

By

Secretary