

Form PTO-1595 (Rev. 06/04)
OMB No. 0651-0027 (exp. 6/30/2005)

U.S. DEPARTMENT OF COMMERCE
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RECORDATION FORM COVER SHEET PATENTS ONLY

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)/Execution Date(s):

Eid Access, Inc.

Execution Date(s) September 12, 2003

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

2. Name and address of receiving party(ies)

Name: Eid Passport, Inc.

Internal Address: _____

Street Address: 9560 S.W. Nimbus Avenue

City: Beaverton

State: Oregon

Country: United States Zip: 97008

Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:

- Assignment Merger
- Security Agreement Change of Name
- Government Interest Assignment
- Executive Order 9424, Confirmatory License
- Other _____

4. Application or patent number(s):

This document is being filed together with a new application.

A. Patent Application No.(s)

10/365,137

B. Patent No.(s)

Additional numbers attached? Yes No

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

Name: Christopher S. Tuttle, Esq.

Internal Address: Kolisch Hartwell, P.C.

Street Address: 520 S.W. Yamhill Street, Suite 200

City: Portland

State: Oregon Zip: 97204

Phone Number: (503) 224-6655

Fax Number: (503) 295-6679

Email Address: tuttle@khpatent.com

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed
- None required (government interest not affecting title)

8. Payment Information

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number 11-1540

Authorized User Name Kolisch Hartwell, P.C.

9. Signature:

Christopher S. Tuttle, Esq.
Signature

August 5, 2004

Date

Christopher S. Tuttle, Esq.

Name of Person Signing

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

2

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
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Articles of Amendment—Business/Professional/Nonprofit

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
OCT 20 2003
OREGON
SECRETARY OF STATE

REGISTRY NUMBER: 048400-96

In keeping with Oregon Statute 192.410-192.595, the information on the application is public record. We must release this information to all parties upon request and it may be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink.

1) NAME OF CORPORATION PRIOR TO AMENDMENT: Eid Access, Inc.

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 NAME The name of the Company is Eid Passport, Inc.

3) THE AMENDMENT WAS ADOPTED ON: September 12, 2003

(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
Preferred Common	6,738,000	6,738,000	6,738,000	0
Common	204,764	204,764	204,764	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

Joseph Howell

Printed Name

Joseph Howell

Title

Secretary

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

Joseph Howell

DAYTIME PHONE NUMBER (include area code.)

503-924-5314

FEES

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10/20/03