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Form PTO-1595 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)		RECORDATION FORM COVER SHEET		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office Atty. Docket: 6020-001	
PATENTS ONLY					
To the honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): Box Consultants Limited		2. Name and address of receiving party(ies) Name: SMARTSLAB Limited Internal Address: _____ _____ _____ Street Address: 1-3 Leonard Street _____ _____ City: London State: United Kingdom Zip: EC2A 4AQ Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____					
Execution Date: October 18, 2004					
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____ A. Patent Application No.(s) _____ B. Patent No.(s) 6,667,089 B1 Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Leonard D. Bowersox KILYK & BOWERSOX, P.L.L.C. Internal Address: _____ _____ Street Address: 3603-E Chain Bridge Road _____ City: Fairfax State: Virginia Zip: 22030		6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41) \$ 40.00 <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> Authorized to be charged to deposit account any deficiencies in the above fee. 8. Deposit account number: 50-0925 (Attach duplicate copy of this page if paying by deposit account)			
DO NOT USE THIS SPACE					
9. Statement and signature. <i>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.</i> Leonard D. Bowersox (Reg. No. 33,228) _____ March 9, 2005 Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and documents: 4					

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
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I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (703) 306-5995 on March 9, 2005.

Sandra Stocklinaki _____
Name (Print) Signature

CP \$40.00 6667089

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**CERTIFICATE OF INCORPORATION
ON CHANGE OF NAME**

Company No. 3889277

The Registrar of Companies for England and Wales hereby certifies that
BOX CONSULTANTS LIMITED

having by special resolution changed its name, is now incorporated
under the name of
SMARTSLAB LIMITED

Given at Companies House, Cardiff, the 18th October 2004



Companies House
for the record

HC006A

TOTAL P.02