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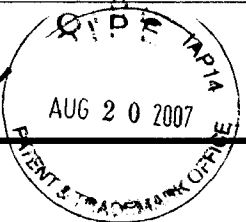
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Attorney Docket Number

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1. Name of conveying party(ies): Monitrix, Inc. Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies): Name: Trigeminal Solutions, Inc. Address: 918 Woodland Ave. San Carlos, CA 94070 Country (if other than USA):
3. Nature of conveyance: Assignment Merger Security Agreement <input checked="" type="checkbox"/> Change of Name Other Execution Date:	

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) 11/529,054 B. Patent No.(s)
 Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed: Trigeminal Solutions, Inc. Attn: Steven Stupp 918 Woodland Ave. San Carlos, CA 94070	6. Number of applications and patents involved: 1 7. Total fee (37 CFR 3.41):.....\$ Please charge to the deposit account listed in Section 8. 8. Deposit account number:
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9. 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.

Steven Stupp	54,475		August 20, 2007
Name of Person Signing	Reg. No.	Signature	Date

Total number of pages including cover sheet: 2

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PATENT & TRADEMARK OFFICE
1038-9

To the Director of the U.S. Patent and Trademark Office

1. Name of conveying party(ies)
Monitrix, Inc

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

3. Nature of conveyance/Execution Date(s):

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

4. Application or patent number(s):
A. Patent Application No.(s)
11/529,054
B. Patent No.(s)
Additional numbers attached? Yes No

2. Name and address of receiving party(ies)

Name: Trigeminal Solutions, Inc.

Internal Address:

Street Address: 918 Woodland Ave

City: San Carlos

State: CA

Country: USA Zip: 94070

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

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

Name: Steven Stupp

Internal Address:

Street Address: 918 Woodland Ave

City: San Carlos

State: CA Zip: 94070

Phone Number: (650) 704-4134

Fax Number:

Email Address: steve.stupp@gmail.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 _____

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Authorized User Name _____

9. Signature:

Name of Person Signing: Steven Stupp, 54,475

Date: 6/15/07

Total number of pages including cover sheet, attachments, and documents: 1

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ENDORSED - FILED
In the office of the Secretary of State
of the State of California

JUN - 8 2007

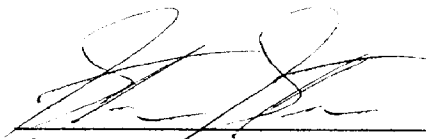
**CERTIFICATE OF AMENDMENT OF
ARTICLES OF INCORPORATION OF
MONITRIX, INC.,
a California corporation**

The undersigned certify that:


1. They are the President and Secretary, respectively, of Monitrix, Inc., a California corporation.
2. ARTICLE First of the Articles of Incorporation of this corporation shall be amended to read as follows: "The name of the corporation is Trigeminal Solutions, Inc."
3. The foregoing amendment of the Articles of Incorporation has been duly approved by the Board of Directors.
4. The foregoing amendment of the Articles of Incorporation have been duly approved by the required vote of shareholders in accordance with Section 902, California Corporations Code. The total number of outstanding shares of the corporation is 3,964,286. The number of shares voting in favor of the amendment equaled or exceeded the vote required. The percentage vote required was more than 50%.

We further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of our own knowledge.

May 2, 2007



Steven. E. Stupp, President



Chris Carpenter, Secretary





State of California
Secretary of State

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

JUN 12 2007

DEBRA BOWEN
Secretary of State