

02-02-2001

WENMM 1618A (12-99)

FORM PTO-1618A
Expires 6-30-99, OMB 0651-0027



101602810
RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type		Conveyance Type	
<input type="checkbox"/> New	C 1-20-01	<input type="checkbox"/> Assignment	<input type="checkbox"/> License
<input type="checkbox"/> Resubmission (Non-Recordation) Document ID#		<input type="checkbox"/> Security Agreement	<input type="checkbox"/> Merger
<input type="checkbox"/> Correction of PTO Error Reel # Frame #		<input type="checkbox"/> Nunc Pro Tunc Assignment	Effective Date Month Day Year <div style="border: 1px solid black; padding: 2px;">08/12/1987</div>
<input checked="" type="checkbox"/> Corrective Document Reel # 001980 Frame # 0938		<input checked="" type="checkbox"/> Change of Name	<input type="checkbox"/> Other

Conveying Party(ies)		<input type="checkbox"/> Mark if additional names of conveying parties attached
Name CASCADE (CANADA) INC. (an Ontario corporation)		Execution Date Month Day Year 09/01/1997
Formerly		

<input type="checkbox"/> Individual	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	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.)
<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Association		
<input type="checkbox"/> Other _____			
<input checked="" type="checkbox"/> Citizenship/State of Incorporation/Organization: <u>ONTARIO, CANADA</u>			

Receiving Party	<input type="checkbox"/> Mark if additional names of receiving party attached
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Name CASCADE (ONTARIO) INC. (an Ontario corporation)			
DBA/AKA/TA:			
Composed of:			
Address (line 1) 5570 Timberlea Boulevard			
Address (line 2)			
Address (line 3)	Mississauga	Ontario/Canada	L4W 4M6
	City	State/Country	Zip Code

<input type="checkbox"/> Individual	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	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.)
<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Association		
<input type="checkbox"/> Other _____			
<input checked="" type="checkbox"/> Citizenship/State of Incorporation/Organization: <u>ONTARIO, CANADA</u>			

01 FC:481 40.00 OP
02 FC:482 275.00 OP

FOR OFFICE USE ONLY

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington D.C., 20231

12083-4:Susan:114936

TRADEMARK
REEL: 002228 FRAME: 0942

FORM PTO-1618B

Expires 6-30-99, OMB 0651-0027

Page 2

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name **Gregory B. Coy**Address (line 1) **Woodard, Emhardt, Naughton, Moriarty & McNett**Address (line 2) **111 Monument Circle, Suite 3700**Address (line 3) **Bank One Center/Tower**Address (line 4) **Indianapolis, Indiana****46204-5137****Correspondent Name and Address**Area Code and Telephone Number
(317) 634-3456

Name

Gregory B. Coy

Address (line 1)

Woodard, Emhardt, Naughton, Moriarty & McNett

Address (line 2)

111 Monument Circle, Suite 3700

Address (line 3)

Bank One Center/Tower

Address (line 4)

Indianapolis, Indiana 46204-5137**Pages**

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

#2

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)**Registration Number(s)**

75227620

1135099

1776420

75090335

1947740

1364372

2100576

1045362

Number of properties

Enter the total number of properties involved

#12

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$315.00

Method of Payment:

Deposit Account

Enclosed Deposit Account

Deposit Account

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

Deposit Account Number: 20-3030

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.

Gregory B. Coy

Name of Person Signing

Signature

Date

January 23, 2001

FORM PTO-1618C
Expires 6-30-99, OMB 0651-0027

**RECORDATION FORM COVER SHEET
CONTINUATION
TRADEMARKS ONLY**

Conveying Party(ies)

Mark if additional names of conveying parties attached

Enter additional Conveying Parties

Execution Date
Month Day Year

Name

Formerly

- Individual General Partnership Limited Partnership
 Corporation Association Other _____
 Citizenship/State of Incorporation/Organization: _____

Receiving Party(ies)

Mark if additional names of receiving parties attached

Enter additional Receiving Party(ies)

Name

DBA/AKA/TA:

Composed of:

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

- Individual General Partnership Limited Partnership
 Corporation Association
 Other _____
 Citizenship/State of Incorporation/Organization: _____

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.*)

Trademark Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

Trademark Application Number(s)	Registration Number(s)
	2016666
	1690066
	1675791
	2165046

10-28-1999

WENMM 1619A (2-99)



101185614

99 OCT 18 AM 10:10

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type	Conveyance Type
<input checked="" type="checkbox"/> New	<input type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement
<input type="checkbox"/> Resubmission (Non-Recordation) Document ID#	<input type="checkbox"/> License <input checked="" type="checkbox"/> Change of Name
<input type="checkbox"/> Correction of PTO Error	<input type="checkbox"/> Merger <input type="checkbox"/> Other
<input type="checkbox"/> Reel # Frame #	
<input type="checkbox"/> Corrective Document	<input type="checkbox"/> Nunc Pro Tunc Assignment
<input type="checkbox"/> Reel # Frame #	
Conveying Party(ies)	<input type="checkbox"/> Mark if additional names of conveying parties attached

Execution Date
 Name Cascade (Ontario) Inc. **Month 04 Day 29 Year 99**
 Formerly Cascade (Canada) Inc.
 Individual General Partnership Limited Partnership Corporation Association
 Other
 Citizenship/State of Incorporation/Organization: Ontario, Canada

Receiving Party Mark if additional names of receiving party attached

Name Industriq! Tires Limited

DBA/AKA/TA

Composed of:

Address (line 1) 3161 Wharton Way North

Address (line 2)

Address (line 3) Misissauga Ontario, Canada L4X 2B7

City	State/Country	Zip Code
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Individual General Partnership Limited Partnership Corporation Association

Other
 Citizenship/State of Incorporation/Organization: New Brunswick, Ontario, Canada

FOR OFFICE USE ONLY

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington D.C., 20231

10/25/1999 DNGUYEN 00000373 75227620

01 FC:481 40.00 OP
02 FC:482 275.00 OP

TRADEMARK
REEL: 002228 FRAME: 0945

MRD 10-18-99
RE

Domestic Representative Name and Address		Enter for the first Receiving Party
Name	Spiro Bereveskos	
Address (line 1)	Woodard, Emhardt, Naughton, Moriarty & McNett	
Address (line 2)	111 Monument Circle, Suite 3700	
Address (line 3)	Bank One Center/Tower	
Address (line 4)	Indianapolis, Indiana 46204-5137 USA	

99 OCT 18 AM 10:10

Correspondent Name and Address		Area Code and Telephone Number: 317-634-3456
Name	Spiro Bereveskos	
Address (line 1)	Woodard, Emhardt, Naughton, Moriarty & McNett	
Address (line 2)	111 Monument Circle, Suite 3700	
Address (line 3)	Bank One Center/Tower	
Address (line 4)	Indianapolis, Indiana 46204-5137	
Pages	Enter the total number of pages of the attached conveyance document including any attachments.	# 2

Trademark Application Number(s) or Registration Number(s)		<input type="checkbox"/> Mark if additional numbers attached
Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).		
Trademark Application Number(s)		Registration Number(s)
75/227,620	75/090,335	1,947,740 2,100,576 1,776,420
		1,364,372 1,045,362 2,016,666
		1,690,066 1,675,791 2,165,046
		1,135,099

Number of properties		Enter the total number of properties involved	# 12
Fee Amount		Fee Amount for Properties Listed (37 CFR 3.41):	\$ 315
Method of Payment:	Enclosed <input checked="" type="checkbox"/>	Deposit Account	<input type="checkbox"/>
Deposit Account	(Enter for payment by deposit account or if additional fees can be charged to the account).		
	Deposit Account Number	# 23-3030	
	Authorization to charge additional fees:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

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.	
Spiro Bereveskos	10/14/99
Name of Person Signing	Signature Date

- 5. The amendment has been duly authorized as required by Sections 168 & 170 (as applicable) of the Business Corporations Act. La modification a été dûment autorisée conformément à l'article 168 et, s'il y a lieu, à article 170 de la Loi sur les compagnies.

- 6. The resolution authorizing the amendment was approved by the shareholders/directors (as applicable) of the corporation on Les actionnaires ou les administrateurs (le cas échéant) de la compagnie ont approuvé la résolution autorisant la modification

12th August 1998
(Day, Month, Year)
 (jour, mois, année)

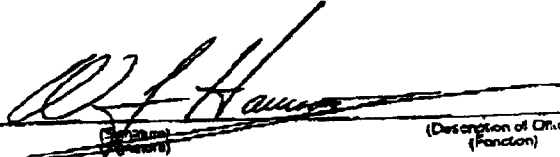
These articles are signed in duplicate.

Les présents status sont signés en double exemplaire.

CASCADE (CANADA) INC.

(Name of Corporation)
(Dénomination sociale de la compagnie)

By/Par:


(Signature)
 (Fonction)

- 5. The amendment has been duly authorized as required by Sections 168 & 170 (as applicable) of the Business Corporations Act. La modification a été dûment autorisée conformément à l'article 168 et, s'il y a lieu, à article 170 de la Loi sur les compagnies.

- 6. The resolution authorizing the amendment was approved by the shareholders/directors (as applicable) of the corporation on Les actionnaires ou les administrateurs (le cas échéant) de la compagnie ont approuvé la résolution autorisant la modification

12th August 1998
(Day, Month, Year)
 (jour, mois, année)


These articles are signed in duplicate.

Les présents status sont signés en double exemplaire.

CASCADE (CANADA) INC.

(Name of Corporation)
 (Dénomination sociale de la compagnie)

By/Par:


(Signature)
 (Fonction)



Ministry of
Consumer and
Commercial Relations

Ministère de
la Consommation
et du Commerce
CERTIFICAT
Ceci certifie que les présents
statuts entrent en vigueur le

T-095 P. 03/30 F-812

1251798

CERTIFICATE
This is to certify that these
articles are effective on

AUGUST 20 1997

John D. Hill

Director, Directeur
Business Corporations Act / Loi sur les sociétés par actions

TRANS
CODE

C

**ARTICLES OF AMENDMENT
STATUTS DE MODIFICATION**

Form 3
Business
Corporations
Act
Formule
numéro 3
Loi
sur les
compagnies

1. The present name of the corporation is: Dénomination sociale actuelle de la compagnie:

C	A	S	C	A	D	E	(C	A	N	A	D	A)	I	N	C	.															

2. The name of the corporation is changed to (if applicable): Nouvelle dénomination sociale de la compagnie (s'il y a lieu):

C	A	S	C	A	D	E	(O	N	T	A	R	I	O)	I	N	C	.															

3. Date of incorporation/amaigamation: Date de la constitution ou de la fusion:

1 September 1997
(Day, Month, Year)
(jour, mois, année)

4. The articles of the corporation are amended as follows: Les statuts de la compagnie sont modifiés de la façon suivante:

To change the name of the Corporation
to CASCADE (ONTARIO) INC.