

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

| | | | |
|----------------------------------|--|---|---------------------------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT | | |
| NATURE OF CONVEYANCE: | CHANGE OF NAME | | |
| CONVEYING PARTY DATA | | | |
| Name | Formerly | Execution Date | Entity Type |
| Solid Axle Industries, LLC | | 11/13/2007 | LIMITED LIABILITY COMPANY: OHIO |
| RECEIVING PARTY DATA | | | |
| Name: | Solid Axle Industries, LLC | | |
| Street Address: | 12356 Mahoning Ave. | | |
| City: | North Jackson | | |
| State/Country: | OHIO | | |
| Postal Code: | 44451 | | |
| Entity Type: | LIMITED LIABILITY COMPANY: DELAWARE | | |
| PROPERTY NUMBERS Total: 3 | | | |
| Property Type | Number | Word Mark | |
| Registration Number: | 3397081 | SOLID | |
| Registration Number: | 3502154 | SOLID AXLE INDUSTRIES | |
| Registration Number: | 3502155 | SOLIDAXLE.COM SOLID SOLID AXLE INDUSTRIES | |
| CORRESPONDENCE DATA | | | |
| Fax Number: | (202)393-5350 | | |
| | <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i> | | |
| Phone: | 202-638-6666 | | |
| Email: | trademark@jhip.com, rpierce@jhip.com, wwilson@jhip.com | | |
| Correspondent Name: | Whitney Wilson | | |
| Address Line 1: | Jacobson Holman PLLC | | |
| Address Line 2: | 400 7th St., NW | | |
| Address Line 4: | Washington, DISTRICT OF COLUMBIA 20004 | | |
| ATTORNEY DOCKET NUMBER: | T36135US0 | | |
| NAME OF SUBMITTER: | Whitney Wilson | | |

OP \$90.00 3397081

Signature:

/Whitney Wilson/

Date:

03/25/2009

Total Attachments: 6

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|------------|--------------|--|--------|-------|---------|------|------|
| DATE: | DOCUMENT ID | DESCRIPTION | FILING | EXPED | PENALTY | CERT | COPY |
| 11/14/2007 | 200731702642 | CONVERSION WITHIN SOS RECORDS (CVS) | 125.00 | .00 | .00 | .00 | .00 |

Receipt

This is not a bill. Please do not remit payment.

HARRINGTON, HOPPE & MITCHELL, LTD.
 26 MARKET STREET SUITE 1200
 PO BOX 6077
 YOUNGSTOWN, OH 44501

STATE OF OHIO
CERTIFICATE
 Ohio Secretary of State, Jennifer Brunner

1567068

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

SOLID AXLE INDUSTRIES, LLC

and, that said business records show the filing and recording of:

Document(s)

CONVERSION WITHIN SOS RECORDS
 (CHANGE BUSINESS TYPE FOR. LIMITED LIABILITY CO.)

Document No(s):

200731702642



United States of America
 State of Ohio
 Office of the Secretary of State

Witness my hand and the seal of
 the Secretary of State at Columbus,
 Ohio this 13th day of November,
 A.D. 2007.

Ohio Secretary of State



Prescribed by:
The Ohio Secretary of State
 Central Ohio; (614) 466-3910
 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

| | |
|----------------------------------|--|
| <input type="radio"/> | Expedite P.O. Box 1380 Columbus, OH 43216 *** Requires an additional \$100.00 fee |
| <input checked="" type="radio"/> | Non Expedite P.O. Box 1329 Columbus, OH 43216 |

1007 OCT 22 PM 2:05

CERTIFICATE OF CONVERSION
FOR ENTITIES CONVERTING WITHIN OR OFF THE RECORDS OF THE OHIO SECRETARY OF STATE
 Filing Fee \$125.00

Pursuant to 1701.811, 1705.381, 1775.55, and 1782.4310 of the Revised Code for the State of Ohio, (as applicable), the undersigned converting business entity does hereby submit these Articles of Conversion for the purpose of converting to a different business entity.

Box 1
 Converting Within The Records of the Ohio Secretary of State

Box 2
 Converting Off The Records of the Ohio Secretary of State
 187-VXX

Complete the information in this section if Box 1 or Box 2 is checked above

The name of the converting business entity is Solid Axle Industries, LLC
 existing under the laws of the state or country of Ohio

The converting business entity is (Check One)

- | | |
|--|--|
| <input type="checkbox"/> Domestic Corporation | <input checked="" type="checkbox"/> Domestic Limited Liability Co. |
| <input type="checkbox"/> Domestic Partnerships | <input type="checkbox"/> Domestic Limited Partnership |
| <input type="checkbox"/> Foreign Corporation | <input type="checkbox"/> Domestic Limited Liability Partnership |
| <input type="checkbox"/> Foreign Limited Liability Co. | <input type="checkbox"/> Foreign Limited Partnership |
| <input type="checkbox"/> Foreign Limited Liability Partnership | <input type="checkbox"/> Business Trust |

The converting entity hereby states they have complied with all laws under the state in which it exists. Furthermore, said law permits for said conversion.

The resulting business entity is (Check One)

- | | |
|---|---|
| <input type="checkbox"/> Domestic Corporation | <input type="checkbox"/> Domestic Limited Liability Co. |
| <input type="checkbox"/> Domestic Partnerships | <input type="checkbox"/> Domestic Limited Partnership |
| <input type="checkbox"/> Foreign Corporation | <input type="checkbox"/> Domestic Limited Liability Partnership |
| <input checked="" type="checkbox"/> Foreign Limited Liability Co. | <input type="checkbox"/> Foreign Limited Partnership |
| <input type="checkbox"/> Foreign Limited Liability Partnership | <input type="checkbox"/> Business Trust |

The name of the resulting business entity is Solid Axle Industries, LLC
 existing under the laws of state or country of Delaware

The effective date of conversion will be upon filing, unless a date is specified (See Instructions) _____
 Date

The name and address of the person or entity that will provide a copy of the declaration of conversion upon written request:

Ralph A. Beard, Esq., 26 Market Street, Suite 1200, PO Box 6077
 Name & Address

Youngstown Ohio 44501-6077
 City State Zip Code

Required information that must accompany conversion certificate if Box 1 is checked.

If the conversion creates a new domestic corporation, limited liability company, limited partnership or a partnership having limited liability, attach the form prescribed by the secretary of state for the *specific entity type* to the certificate of conversion. (See Instructions)

Required information that must accompany conversion certificate if Box 2 is checked.

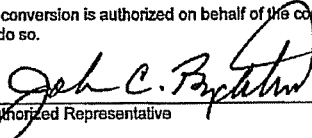
If the converting entity is a domestic or foreign entity that will not be licensed in this state, provide the name and address of the statutory agent upon whom any process, notice or demand may be served:

| | | |
|-------------------------|------|------------------|
| Name of Statutory Agent | | |
| Street Address | City | Ohio Zip Code |

If the converting entity is a domestic or foreign corporation licensed to transact business in Ohio, and converting off the records, the certificate of conversion must be accompanied by the affidavits herein attached. (See Instructions)

IN WITNESS WHEREOF, the declaration of conversion is authorized on behalf of the converting entity and that each person sign the certificate of conversion is authorized to do so.

Must be signed by:
An authorized
representative(s)



 Authorized Representative
 Member

 Title

 Authorized Representative

 Title

 Authorized Representative

 Title



www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Prescribed by:
The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

| | |
|---|---|
| Expedite this Form: (Select One) | |
| <input type="radio"/> Yes | PO Box 13905 Columbus, OH 43216 *** Requires an additional fee of \$100 *** |
| <input type="radio"/> No | PO Box 670 Columbus, OH 43216 |

**ORGANIZATION / REGISTRATION OF
LIMITED LIABILITY COMPANY**
(Domestic or Foreign)
Filing Fee \$125.00

PH 2:05

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

| | |
|---|---|
| <input type="checkbox"/> Articles of Organization for Domestic Limited Liability Company (115-LCA) ORC 1705 | <input checked="" type="checkbox"/> Application for Registration of Foreign Limited Liability Company (106-LFA) ORC 1705 March 13, 2007 (Date of Formation) Delaware (State) |
|---|---|

Complete the general information in this section for the box checked above.

Name Solid Axle Industries, LLC

Check here if additional provisions are attached

* If box (1) is checked, name must include one of the following endings: limited liability company, limited, Ltd, L.Ld., LLC, L.L.C.

Complete the information in this section if box (1) is checked.

Effective Date (Optional) _____ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

This limited liability company shall exist for _____ (Optional) (Period of existence)

Purpose (Optional) _____

The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is

(Optional) _____ (Name)
_____ (Street) NOTE: P.O. Box Addresses are NOT acceptable.
_____ (City) _____ (State) _____ (Zip Code)

Complete the information in this section if box (1) is checked Cont.

ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member, manager or representative of

(name of limited liability company)

hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is:

(Name of Agent)

(Street) NOTE: P.O. Box Addresses are NOT acceptable.

(City) Ohio (State) (Zip Code)

Must be authenticated by an authorized representative

Authorized Representative Date

Authorized Representative Date

ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

(name of limited liability company)

hereby acknowledges and accepts the appointment of agent for said limited liability Company.

(Agent's signature)

PLEASE SIGN PAGE (3) AND SUBMIT COMPLETED DOCUMENT

Complete the information in this section if box (2) is checked.

The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is

Ralph A. Beard, Esq.
(Name)
26 Market Street, Suite 1200
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
Youngstown Ohio 44503
(City) (State) (Zip Code)

The name under which the foreign limited liability company desires to transact business in Ohio is

Solid Axle Industries, LLC

The limited liability company hereby appoints the following as its agent upon whom process against the limited liability company may be served in the state of Ohio. The name and complete address of the agent is

Ralph A. Beard, Esq.
(Name)
26 Market Street, Suite 1200
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
Youngstown Ohio 44503
(City) (State) (Zip Code)

The limited liability company irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the OHIO SECRETARY OF STATE if:

- a. the agent cannot be found, or
- b. the limited liability company fails to designate another agent when required to do so, or
- c. the limited liability company's registration to do business in Ohio expires or is cancelled.

REQUIRED

Must be authenticated (signed) by an authorized representative (See Instructions)

John C. Boydston 2-9-07
Authorized Representative Date

John Boydston
(Print Name)

Authorized Representative Date

(Print Name)