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
Logic Control Sales, Inc.		03/14/2005	CORPORATION: KANSAS

RECEIVING PARTY DATA

Name:	Logic, Inc.	
Street Address:	890 North Mart-Way Court	
City:	Olathe	
State/Country:	KANSAS	
Postal Code:	66061	
Entity Type:	CORPORATION: KANSAS	

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	3175121	LOGIC

CORRESPONDENCE DATA

Fax Number: 8167531536

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US

Mail.

Email: uspt@polsinelli.com

Correspondent Name: Michael A. Williamson

Address Line 1: 700 W. 47th Street

Address Line 2: Suite 1000

Address Line 4: Kansas City, MISSOURI 64112

ATTORNEY DOCKET NUMBER:	022482-098598
NAME OF SUBMITTER:	Michael A. Williamson
Signature:	/MAW/
Date:	11/27/2012

Total Attachments: 1

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TRADEMARK REEL: 004907 FRAME: 0655 40.00 31/512

767004

Contact Information
Kansas Secretary of State
Ron Thormburgh
Memorial Hall, 1st Floor
120 S.W. 10th Avenue
Topeka, KS 66612-1594
(785) 296-4564
kssos@kssos.org
www.kseos.org

KANSAS SECRETARY OF STATE Domestic For Profit Corporation Certificate of Amendment

AP 53-14

All information must be completed or this document will not be accepted for filing.

1	
03-15-200	08:12:00
053	\$35.00
1253	61
0767004	

1. Name of the corporation:

Logic Control Sales, Inc.

Name must match the some on record with the secretary of state

2. The articles of incorporation are amended as follows:

01062899

Article FIRST is amended to read as follows:

FIRST: The name of this corporation is LOGIC, THE

The amendment was duly adopted in accordance with the processions of K.S.A. 17-6602.

I declare under penalty of perjury under the law of the state of Kansas that the law going is true and consecu-

Executed on the __/

7_ of _______

2005

Authorized officer

David VanLanding

Instruction

Submit this form with the \$35 filling fee.

Notice: There is a \$25 service fee for all returned checks.

عاز 12/06/04 أستد

K.S.A. (7-000)

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C.C.id \$978:0N RECORDED: 11/27/2012