

## TRADEMARK ASSIGNMENT COVER SHEET

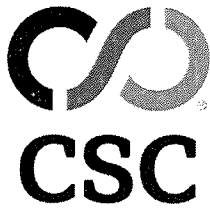
Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM587753

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Baker Tilly Virchow Krause, LLP		11/25/2019	Limited Liability Partnership: ILLINOIS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Baker Tilly US, LLP		
<b>Street Address:</b>	Ten Terrace Court		
<b>Internal Address:</b>	P.O. Box 7398		
<b>City:</b>	Madison		
<b>State/Country:</b>	WISCONSIN		
<b>Postal Code:</b>	53718		
<b>Entity Type:</b>	Limited Liability Partnership: ILLINOIS		
<b>PROPERTY NUMBERS Total: 6</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Serial Number:</b>	88285750	INFORM	
<b>Serial Number:</b>	88373100	ARC	
<b>Registration Number:</b>	3857770	CANDOR. INSIGHT. RESULTS.	
<b>Registration Number:</b>	3212370	VIRCHOW KRAUSE & COMPANY	
<b>Registration Number:</b>	5945751	VALUE ARCHITECT	
<b>Registration Number:</b>	5189090	QUALITY OF STRATEGY	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Phone:</b>	608-257-3501		
<b>Email:</b>	madipdocket@michaelbest.com		
<b>Correspondent Name:</b>	Michael Best & Friedrich LLP		
<b>Address Line 1:</b>	One South Pinckney Street, Suite 700		
<b>Address Line 4:</b>	Madison, WISCONSIN 53703		
<b>ATTORNEY DOCKET NUMBER:</b>	093213-9009-002		
<b>NAME OF SUBMITTER:</b>	Laura M. Konkell		
<b>SIGNATURE:</b>	/Laura M. Konkell/		

OP \$165.00 88285750

<b>DATE SIGNED:</b>	07/20/2020
<b>Total Attachments: 4</b> source=Name Change Baker Tilly#page1.tif source=Name Change Baker Tilly#page2.tif source=Name Change Baker Tilly#page3.tif source=Name Change Baker Tilly#page4.tif	



Teresa Janusz  
Baker Tilly Virchow Krause, LLP  
PO Box 7398  
Madison, WI 53707-7398

**Date:** 01/31/2020  
**RE:** Compliance Mail

**Entity Name:** Baker Tilly Virchow Krause, LLP  
**Entity ID:** 3244476  
**Jurisdiction:** Illinois

We are pleased to forward to you the enclosed correspondence that may require your immediate action.

As your registered agent, we receive mail (e.g. annual reports, tax bills, notices of delinquency/revocation, licenses & registrations) from federal or state agencies on your behalf.

If you have questions about the enclosed document(s), please contact the agency indicated on the enclosure.

As your registered agent, CSC serves as a compliance partner for your organization. However, we can only update you regarding important documents, filings, and legal and statutory changes if we have accurate contact information on file for your organization.

Do we have your most up-to-date contact information? CSC requires a current physical mailing address, telephone number, and e-mail address for all compliance contacts in your organization. Since some states now send annual report filing notices electronically, it is especially important that we have your email address on file.

If you need to update your contact information on file with CSC, please visit [www.cscglobal.com/contact](http://www.cscglobal.com/contact) and submit your new information today.

**Enclosure:** FILED AMENDMENT;IL SEC OF STAT

251 Little Falls Drive, Wilmington, Delaware 19808-1674  
(866) 846-8765 | [complianceemail@cscinfo.com](mailto:complianceemail@cscinfo.com)



# OFFICE OF THE SECRETARY OF STATE

JESSE WHITE-Secretary of State

002125  
JANUARY 29, 2020

ILLINOIS CORPORATION SERVICE C  
801 ADLAI STEVENSON DRIVE  
SPRINGFIELD, IL 62703-4261

RE BAKER TILLY US, LLP

DEAR SIR OR MADAM:

ENCLOSED PLEASE FIND A FILED COPY OF THE STATEMENT OF AMENDMENT TO THE  
STATEMENT OF QUALIFICATION.

THE REQUIRED FILING FEE HAS BEEN RECEIVED AND CREDITED.

SINCERELY YOURS,

JESSE WHITE  
ILLINOIS SECRETARY OF STATE  
LIMITED LIABILITY DIVISION  
DEPARTMENT OF BUSINESS SERVICES  
217/524-8008

**TRADEMARK**  
**REEL: 007004 FRAME: 0085**

FORM **UPA-Amendment**  
**(1001(h)/1102(g))**

October 2014

**Secretary of State**  
Department of Business Services  
Limited Liability Division  
501 S. Second St., Rm. 357  
Springfield, IL 62756  
217-524-8008  
www.cyberdriveillinois.com


Payment may be made by check payable to Secretary of State. If check is returned for any reason this filing will be void.

Illinois  
Uniform Partnership Act  
Statement of Amendment

**SUBMIT IN DUPLICATE**

Type or Print Clearly.

Filing Fee: \$25

Approved: 

FILE #: 1002125

This space for use by Secretary of State.

**FILED**

**DEC 12 2019**

JESSE WHITE  
SECRETARY OF STATE

Federal Employer Identification Number (F.E.I.N.): 39-0859910



1. Partnership Name: Baker Tilly Virchow Krause, LLP

2. State of Jurisdiction: Illinois

3. The Statement of Qualification is amended as follows: (Check all applicable changes and specify them in item 4 below.) (For address changes – P.O. Box alone is unacceptable.)

- a) Change of registered agent and/or registered agent's office (give new name/address in item 4a) Must be an Illinois resident/company.
- b) Change in address of chief executive office (give new address in item 4b)
- c) Change in number of partners (give change of number of partners in item 4c) (Attach current list of partners.) (Total number of partners and number of Illinois partners.)
- d) Change in Limited Liability Partnership name (give name change in item 4d) (Certified copy of Amendment From Domicile State required.)
- e) Change in partner's name/address (give name/address change in item 4e)
- f) Other (give information in item 4f)

4. List all changes from item 3.

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

d) Baker Tilly US, LLP

e) \_\_\_\_\_

f) \_\_\_\_\_

**PAID**

**DEC 13 2020**

**DEPARTMENT OF  
BUSINESS SERVICES**

UPA-1001(h)/1102(g)


5. Effective date of this amendment:

Upon filing by the Secretary of State

Deferred effective date (not to exceed 30 days after the file date): \_\_\_\_\_  
Month, Day, Year

6. The undersigned declares, under the penalty of perjury, under the laws of the State of Illinois, that the foregoing is true, correct and complete.

Executed on the 25th Day of November Month, 2019 Year by a partner.

  
\_\_\_\_\_  
Signature  
James Smolinski  
\_\_\_\_\_  
Name (type or print)

205 N Michigan Avenue  
\_\_\_\_\_  
Street Address  
Chicago, IL 60601  
\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Name if a Corporation or other Entity

For additional space, continue in the same format on a plain white 8.5x11" sheet of paper.