

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM653686

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
West Chester Holdings, Inc.		02/12/2019	Corporation: OHIO
RECEIVING PARTY DATA			
Name:	West Chester Holdings, LLC		
Street Address:	11500 Canal Road		
City:	Cincinnati		
State/Country:	OHIO		
Postal Code:	45241		
Entity Type:	Limited Liability Company: OHIO		
PROPERTY NUMBERS Total: 54			
Property Type	Number	Word Mark	
Serial Number:	88871241	LIQUIDDEFENSE	
Registration Number:	2506379	WEST CHESTER	
Registration Number:	4589772	WEST CHESTER PROTECTIVE GEAR	
Registration Number:	4499565	WEST CHESTER PROTECTIVE GEAR	
Registration Number:	4177189	WORK FOR HOPE	
Registration Number:	5504519	XLOCK CUFF	
Registration Number:	5504520	XTOUCH	
Registration Number:	3989799	ZONE DEFENSE	
Registration Number:	3021564	3X2	
Registration Number:	5499247	5DEX	
Registration Number:	5287040	AIR KRUSH	
Registration Number:	5125129	AQUA ARMOR	
Registration Number:	4749392	BARRACUDA	
Registration Number:	3021563	BRUTE	
Registration Number:	5183069	CUT FORCE	
Registration Number:	4314862	DIRTY WORK	
Registration Number:	4404805	EXTREME WORK	
Registration Number:	4923138	FIT FOR WORK, FIT FOR LIFE	
Registration Number:	4808991	GEAR UP	

OP \$1365.00 88871241

Property Type	Number	Word Mark
Registration Number:	4700485	GEAR UP
Registration Number:	2990128	GLOVES ON THE GO
Registration Number:	5499246	INDESTRUX
Registration Number:	4211593	IRONTEX
Registration Number:	3032710	JOB1
Registration Number:	5499250	KNUCKLE KNOX
Registration Number:	5587734	LOCX-ON GRIP
Registration Number:	3021562	MASTER GEAR
Registration Number:	2599101	MASTER GUARD
Registration Number:	5531591	METAL TAMER
Registration Number:	5771129	MICROARMOR
Registration Number:	5499249	MULTI-PLEX
Registration Number:	5633743	MULTI-PURPX
Registration Number:	5271749	OIL ARMOR
Registration Number:	1729023	POSIGRIP
Registration Number:	3952592	POSI-THERM
Registration Number:	1981193	POSI-WEAR
Registration Number:	3766375	PRO PS SERIES
Registration Number:	5214477	PROTECTIVE GEAR BUILT FOR YOU
Registration Number:	5671100	STRETCH FORCE
Registration Number:	5633744	STRIKE PROTEX
Registration Number:	5520136	SUMO
Registration Number:	5520137	SUMO
Registration Number:	5430135	SUMO
Registration Number:	5430134	SUMO
Registration Number:	4970190	SUMO GRIP
Registration Number:	4970189	SUMO GRIP
Registration Number:	3021561	SUPER TECH
Registration Number:	3107308	TANK
Registration Number:	3021560	THE TASK
Registration Number:	5531746	TOUGHX
Registration Number:	5717200	VIZ UP
Registration Number:	5499251	VIZX
Registration Number:	4589771	W
Registration Number:	4507969	W

CORRESPONDENCE DATA

Fax Number: 6124927077

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.

Phone: 6124927717
Email: mhill@fredlaw.com
Correspondent Name: Michelle Hill
Address Line 1: 200 SOUTH 6TH STREET, SUITE 4000
Address Line 4: Minneapolis, MINNESOTA 55402

ATTORNEY DOCKET NUMBER:	81205.8
NAME OF SUBMITTER:	Michelle Hill
SIGNATURE:	/Michelle Hill/
DATE SIGNED:	06/14/2021

Total Attachments: 10

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DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
02/12/2019	201904301582	Conversion Within SOS Records (CVS)	99.00	300.00	0.00	0.00

Receipt

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

KATZ TELLER BRANT HILD
255 E FIFTH STREET SUITE 2400
CINCINNATI, US 45202

**STATE OF OHIO
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose
901056**

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

WEST CHESTER HOLDINGS, LLC

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

Document(s)

Conversion Within SOS Records

Effective Date: 02/12/2019

Document No(s):

201904301582

CHANGE BUSINESS TYPE DOM. PROFIT LIM. LIAB. CO.



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
12th day of February, A.D. 2019.

Ohio Secretary of State

Form 700 Prescribed by:

OFFICE OF THE
Ohio Secretary of State



Toll Free: (877) SOS-FILE (877-767-3453) | Central Ohio: (614) 466-3910
www.OhioSecretaryofState.gov | BusServ@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

Certificate for Conversion for Entities Converting Within or Off the Records of the Ohio Secretary of State

Filing Fee: \$99
Form Must Be Typed

(CHECK ONLY ONE (1) BOX)

(1) **Converting Within The Records of the Ohio Secretary of State**

(2) **Converting Off The Records of the Ohio Secretary of State (187-VXX)**

Name of the converting entity

Jurisdiction of Formation

Charter/Registration Number

The converting entity is a:
(Check Only (1) One Box)

- | | |
|--|---|
| <input type="checkbox"/> Domestic Nonprofit Corporation | <input type="checkbox"/> Partnership |
| <input checked="" type="checkbox"/> Domestic For-Profit Corporation | <input type="checkbox"/> Domestic Limited Partnership |
| <input type="checkbox"/> Foreign Nonprofit Corporation | <input type="checkbox"/> Foreign Limited Partnership |
| <input type="checkbox"/> Foreign For-Profit Corporation | <input type="checkbox"/> Domestic Limited Liability Partnership |
| <input type="checkbox"/> Domestic Nonprofit Limited Liability Company | <input type="checkbox"/> Foreign Limited Liability Partnership |
| <input type="checkbox"/> Foreign Nonprofit Limited Liability Company | |
| <input type="checkbox"/> Domestic For-Profit Limited Liability Company | |
| <input type="checkbox"/> Foreign For-Profit Limited Liability Company | |

The converting entity hereby states that it has complied with all laws in the jurisdiction under which it exists and that those laws permit the conversion.

Name of the converted entity

Jurisdiction of Formation

The converted entity is a:
(Check Only (1) One Box)

Domestic For-Profit Corporation

Domestic Professional Association
If Domestic For-Profit Corporation **OR** Domestic Professional Association, please indicate total number of shares

Foreign Nonprofit Corporation

Foreign For-Profit Corporation

Domestic Nonprofit Limited Liability Company

Foreign Nonprofit Limited Liability Company

Domestic For-Profit Limited Liability Company

Foreign For-Profit Limited Liability Company

Partnership

Domestic Limited Partnership

Foreign Limited Partnership

Domestic Limited Liability Partnership

Foreign Limited Liability Partnership

Effective Date (Optional) (The conversion is effective upon the filing of this certificate or on a later date specified in the certificate)

Name and address of the person or entity that will provide a copy of the declaration of conversion upon written request.

Name

Mailing Address

City State Zip Code

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 Ohio, provide the name and address of the statutory agent upon whom any process, notice or demand may be served.

Name of Statutory Agent

Mailing Address

City State ZIP Code

See instructions for additional filing requirements if

(1) the conversion creates a new domestic entity,

(2) the converted entity is a foreign entity that desires to transact business in Ohio; or

(3) if a domestic corporation or foreign corporation licensed in Ohio is the converting entity.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Must be signed by an authorized representative.

John Francy

Signature

By (if applicable)

John Francy

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities.

West Chester Holdings, Inc.

Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	2/12/19	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319 Overnight: P.O. Box 182413 Columbus, OH 43218-2413	2/12/19
*Only required for domestic for-profit corporations		Regular: P.O. Box 182413 Columbus, OH 43218-2413	
Ohio Department of Taxation Taxpayer Services Division/Tax Release Unit PO Box 182382 Columbus, OH 43218-2382 Dissolution@tax.state.oh.us		<input type="checkbox"/> The corporation is not required to pay or the department of taxation has not assessed any personal property tax.	
Complete this date notified field only if the corporation is a domestic non-profit corporation or foreign corporation. [see note below]			

*Note: Domestic for-profit corporations must submit with this filing a Certificate of Tax Clearance issued by the Ohio Department of Taxation.

Note: This affidavit must be signed by one or more persons executing the certificate or by an officer of the corporation.

Signature *John C. Franey* Title *CHIEF FINANCIAL OFFICER*

Name *JOHN C. FRANCY*

Mailing Address 11500 Canal Road

City Cincinnati State OH Zip Code 45241

Sworn to and subscribed in my presence on 2/12/19 Date



Notary Public *[Signature]*

Commission Expires 11/21/21 Date

AFFIDAVIT OF PERSONAL PROPERTY

State of

County of

Name of Officer

Title of Officer

of
Name of Corporation

and that this affidavit is made in compliance with Section of the Ohio Revised Code.

That above-named corporation: (Check one (1) of the following)

- Has no personal property in any county in Ohio
- Is the type required to pay personal property taxes to state authorities only
- Has personal property in the following county (ies)

Signature:

Title:

Sworn to and subscribed in my presence on Date



Notary Public

Expiration date of Notary Public's Commission Date

Form 533A Prescribed by:

OFFICE OF THE
Ohio Secretary of State



Toll Free: (877) SOS-FILE (877-767-3453) | Central Ohio: (614) 466-3910

www.OhioSecretaryofState.gov | BusServ@OhioSecretaryofState.gov

File online or for more information: www.OHBusinessCentral.com

Articles of Organization for a Domestic Limited Liability Company

Filing Fee: \$99

Form Must Be Typed

CHECK ONLY ONE (1) BOX

(1) Articles of Organization for Domestic
 For-Profit Limited Liability Company
 (115-LCA)

(2) Articles of Organization for Domestic
 Nonprofit Limited Liability Company
 (115-LCA)

Name of Limited Liability Company

(Name must include one of the following words or abbreviations:
 "limited liability company," "limited," "LLC," "L.L.C.," "Ltd.," or "Ltd".)

Optional: Effective Date (MM/DD/YYYY) (The legal existence of the corporation begins upon the
 filing of the articles or on a later date specified that is not
 more than ninety days after filing.)

Optional: This limited liability company shall exist for
 Period of Existence

Optional: Purpose

**** Note for Nonprofit LLCs**
 The Secretary of State does not grant tax exempt status. Filing with our office is not sufficient to obtain state or federal tax
 exemptions. Contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit limited
 liability company secures the proper state and federal tax exemptions. These agencies may require that a purpose clause
 be provided. **

Original Appointment of Statutory Agent

The undersigned authorized member(s), manager(s) or representative(s) of

West Chester Holdings, LLC

(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 corporation may be served. The complete address of the agent is:

Corporate Statutory Services, Inc.

(Name of Statutory Agent)

255 E Fifth St Ste 2400

(Mailing Address)

Cincinnati

(Mailing City)

OH

(Mailing State)

45202

(Mailing ZIP Code)

Acceptance of Appointment

The Undersigned, Corporate Statutory Services, Inc., named herein as the
(Name of Statutory Agent)

Statutory agent for West Chester Holdings, LLC
(Name of Limited Liability Company)

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

Statutory Agent Signature Amy Brown, Assistant Secretary
(Individual Agent's Signature / Signature on Behalf of Business Serving as Agent)

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Articles and original appointment of agent must be signed by a member, manager or other representative.

If the authorized representative is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.

If the authorized representative is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.

Amy Brown

Signature

Katz Teller Brant & Hild, A Legal Professional Association

By (if applicable)

Amy Brown, Authorized Representative

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name



PO Box 182382
Columbus, OH 43218-2382
tax.ohio.gov



AMY BROWN

WEST CHESTER HOLDINGS, INC.
255 E FIFTH ST STE 2400
CINCINNATI, OH 45202
USA

February 08, 2019
Contact ID: 6728700659

RE: Certificate of Tax Clearance
Entity Name: West Chester Holdings, Inc.
Ohio Charter # 00901056
Certificate Issue Date: 02/08/2019

This certificate confirms the above-referenced entity filed all tax returns and paid in full all taxes and fees administered by the Tax Commissioner through the certificate issue date referred to above.

This certificate does not preclude the Department from issuing a bill and/or assessment against the entity for any tax returns and/or tax liabilities and fees that become due after the certificate issue date. Also, this certificate does not preclude the Department from conducting an examination or audit for any period ending prior to the date this certificate is filed with the Ohio Secretary of State.

This Certificate of Tax Clearance is valid for thirty (30) days from the certificate issue date and must be filed along with all forms prescribed by the Ohio Secretary of State.

Jeffrey A. McClain
Tax Commissioner

If you have any questions, please contact us.

Tax Release Unit
Phone: 1-855-995-4422
Fax: 1-206-984-0378
TTY/TDD: 1-800-750-0750