

## PATENT ASSIGNMENT

Electronic Version v1.1


Stylesheet Version v1.1

|  |                              |
|--|------------------------------|
| SUBMISSION TYPE:   | NEW ASSIGNMENT               |
| NATURE OF CONVEYANCE:  | CHANGE OF NAME               |
| EFFECTIVE DATE:  | 06/06/2007                   |
| CONVEYING PARTY DATA   |                              |
| Name   | Execution Date               |
| Ultimate Support Systems, Inc  | 06/06/2007                   |
| RECEIVING PARTY DATA   |                              |
| Name:  | Ultimate Holdings, Inc.      |
| Street Address:  | 2506 Zurich Dr.              |
| City:  | Fort Collins                 |
| State/Country:   | COLORADO                     |
| Postal Code:   | 80524                        |
| PROPERTY NUMBERS Total: 1  |                              |
| Property Type  | Number                       |
| Application Number:  | 29221544                     |
| CORRESPONDENCE DATA  |                              |
| Fax Number:  | (970)224-3175                |
| <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i> |                              |
| Phone:   | 970-224-3100                 |
| Email:   | cswanson@ideaassetgroup.com  |
| Correspondent Name:  | Santangelo Law Offices       |
| Address Line 1:  | 125 South Howes, Third Floor |
| Address Line 4:  | Fort Collins, COLORADO 80521 |
| ATTORNEY DOCKET NUMBER:  | ULTIMATEHOLD-PRO-ELITE-DE    |
| NAME OF SUBMITTER:   | Cheryl A. Swanson            |
| Total Attachments: 2<br>source=Co-SecState#page1.tif<br>source=Co-SecState#page2.tif |                              |

OP \$40.00 29221544

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PATENT  
REEL: 019849 FRAME: 0461



\$125.00

**\$ 25.00**

Date and Time: 06/06/2007 09:59 AM

Document number: 20071267467

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filed pursuant to §7-90-301, et seq. and §7-110-106 of the Colorado Revised Statutes (C.R.S.)

19871259518

ULTIMATE SUPPORT SYSTEMS, INC.

ULTIMATE HOLDINGS, INC.

☐ "bank" or "trust" or any derivative thereof  
☐ "credit union"      ☐ "savings and loan"  
☐ "insurance", "casualty", "mutual", or "surety"

6. If the corporation's period of duration as amended is less than perpetual, state the date on which the period of duration expires:

(mm/dd/yyyy)

If the corporation's period of duration as amended is perpetual, mark this box:



(mm/dd/yyyy)

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

8. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

|   |                       |                   |          |
|---|-----------------------|-------------------|----------|
| Campbell  | William               | J.                |          |
| (Last)  | (First)               | (Middle)          | (Suffix) |
| Faegre & Benson LLP                                 |                       |                   |          |
| (Street name and number or Post Office information) |                       |                   |          |
| 1700 Lincoln Street, Suite 3200                     |                       |                   |          |
| Denver  | CO                    | 80203             |          |
| (City)  | (State)               | (Postal/Zip Code) |          |
|   | United States         |                   |          |
| (Province – if applicable)                          | (Country – if not US) |                   |          |

*(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box ☐ and include an attachment stating the name and address of such individuals.)*

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