

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT3573055

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
GLODESIGN, INC.	04/28/2015
RECEIVING PARTY DATA	
Name:	SWAPONZ, INC.
Street Address:	190 N. MAIN ST., STE. 1
City:	NATICK
State/Country:	MASSACHUSETTS
Postal Code:	01760
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	13832903
CORRESPONDENCE DATA	
Fax Number:	(617)500-2499
<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>	
Email:	info@orpatent.com, smith@orpatent.com
Correspondent Name:	OCCHIUTI & ROHLICEK LLP
Address Line 1:	321 SUMMER STREET
Address Line 4:	BOSTON, MASSACHUSETTS 02210
ATTORNEY DOCKET NUMBER:	40069-002001
NAME OF SUBMITTER:	GRACI SMITH
SIGNATURE:	/Graci Smith/
DATE SIGNED:	10/16/2015
Total Attachments: 4	
source=CertificateofAmendment#page1.tif	
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FPC**

The Commonwealth of Massachusetts

William Francis Galvin
Secretary of the Commonwealth
One Ashburton Place, Boston, Massachusetts 02108-1512

FORM MUST BE TYPED

Certificate of Amendment
(General Laws Chapter 156D, Section 15.04; 950 CMR 113.49)

FORM MUST BE TYPED

(1) Exact name of corporation: GLODESIGN, INC.
(as contained in the Division's records)

(2) Registered office address: 190 N. MAIN ST., STE 1. NATICK, MA 01760
(number, street, city or town, state, zip code)

(3) This amendment shall change:
(check appropriate box(es))

the corporation's name to*: SWAPONZ, INC.

the period of the corporation's duration to: _____

the state or country of its incorporation to*: _____

the street address of its principal office to: _____

the fiscal year end to: _____

the activities conducted by the foreign corporation in the commonwealth: _____

its officers and directors: _____

other: _____

The name must satisfy the requirements of G.L. Chapter 156D, Section 15.06.

** If the amendment includes a change of its corporate name, or the state or country of its incorporation, attach a certificate evidencing the changes duly authenticated by the secretary of state or other official having custody of the corporate records in the state or country under whose law it is incorporated. If the certificate is in a foreign language, a translation thereof under oath of the translator shall be attached.*

This certificate is effective at the time and on the date approved by the Division, unless a later effective date not more than 90 days from the date of filing is specified: _____

Signed by: DONALD H. SIEGEL _____
(signature of authorized individual)

- Chairman of the board of directors,
- President,
- Other officer,
- Court-appointed fiduciary,

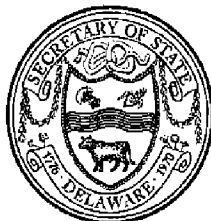
on this 28th day of APRIL, 2015

Delaware

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The First State


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "GLODESIGN, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SWAPONZ, INC.", THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2015, AT 1:35 O'CLOCK P.M.



5098496 8320

150571944

You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2325580

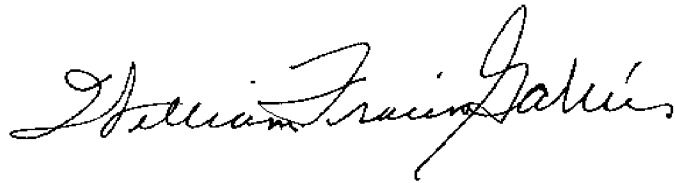
DATE: 04-27-15

PATENT
REEL: 036880 FRAME: 0199

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

April 28, 2015 04:28 PM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is written in a cursive style with a large, prominent initial "W".

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth