PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4439348

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Execution Date
NILFISK-ADVANCE, INC.	06/05/2015

RECEIVING PARTY DATA

Name:	NILFISK, INC.
Street Address:	14600 21ST AVENUE N.
City:	PLYMOUTH
State/Country:	MINNESOTA
Postal Code:	55447

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	14685382

CORRESPONDENCE DATA

Fax Number:

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.

Email: request@slwip.com

Correspondent Name: SCHWEGMAN LUNDBERG & WOESSNER, P.A.

Address Line 1: P.O. BOX 2938

Address Line 4: MINNEAPOLIS, MINNESOTA 55402

ATTORNEY DOCKET NUMBER:	2661.061US1
NAME OF SUBMITTER:	CATINA JENSEN
SIGNATURE:	/CaTina Jensen/
DATE SIGNED:	06/01/2017

Total Attachments: 3

source=2661061US1_ASSN#page1.tif source=2661061US1_ASSN#page2.tif source=2661061US1_ASSN#page3.tif

PATENT 504392651 REEL: 042563 FRAME: 0011

RECORDATION FORM COVER SHEET PATENTS ONLY

Patent and Trademark Office Atty Ref/Docket No.: 2661.061US1 To the Director of the U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof. 2. Name and address of receiving party(ies): 1. Name of conveying party(ies): Name: Nilfisk, Inc. Nilfisk-Advance, Inc. Street Address: 14600 21st Avenue N. Additional name(s) of conveying party(ies) attached? City: <u>Plymouth</u> State: <u>MN</u> Zip Country: <u>United States of America</u> Zip: <u>55447-3408</u> []Yes [X]No 3. Nature of conveyance: Additional name(s) & address(es) attached? []Yes [X]No [] Merger [] Assignment [] Security Agreement [X] Change of Name [] Other Execution Date: June 5, 2015 4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) B. Patent No.(s) Serial No. 14/685,382 Additional numbers attached? []Yes [X]No 6. Total number of applications and patents involved: 1 5. Name and address of party to whom correspondence concerning document should be mailed: 7. Total fee (37 CFR 3.41):\$ <u>0.00</u> Name: Stephen M. Komarec []Enclosed []Authorized to be charged to deposit account Address: 19-0743 Schwegman Lundberg & Woessner, P.A. P.O. Box 2938 8. Please charge any additional fees or credit any over Minneapolis, MN 55402--0938 payments to our Deposit Account No.: 19-0743 DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. 1 Japan M. Konne 1 June 1, 2017 Stephen M. Komarec/Reg. No. 60,817 Name of Person Signing Total number of pages including cover sheet: 3 Mail documents to be recorded with required cover sheet information to:

Commissioner of Patents and Trademarks
Mail Stop Assignment Recordation Services

P.O. Box 1450

Alexandria, VA 22313-1450

PATENT REEL: 042563 FRAME: 0012

Office of the Minnesota Secretary of State

Minnesota Business & Nonprofit Corporations Amendment to Articles of Incorporation

Minnesota Statutes, Chapter 302A or 317A



Read the instructions before completing this form. Filing Fee: \$55 for expedited service in-person and online filings, \$35 for mail

L. Corporate Name: (Required)	***************************************	*******
Nilfisk-Advance, Inc.		
List the name of the company prior to ar	ny desired name change	vicasions
than 30 days after filing with the Secreta 3. The following amendment(s) to article	Format: (mm/dd/yyyy) les regulating the above corporation were adopted: (Insert full text of newly cle(s) is (are) being amended or added.) If the full text of the amendment will	
	ARTICLE 1	
The name of this corporation shall	be Nilfisk, Inc.	
5. I, the undersigned, certify that I am si person(s) whose signature would be requespacities. I further certify that I have correct and in compliance with the applied	guing this document as the person whose signature is required, or as agent of uired who has authorized me to sign this document on his/her behalf, or in both ompleted all required fields, and that the information in this document is true cable chapter of Minnesota Statutes. I understand that by signing this document is set forth in Section 609.48 as if I had signed this document under oath.	oth and
Steven D. Kelley	06/04/2015	
Signature of Authorized Person or Authorized	orized Agent Date	
steven kellev@nilfisk.com	retary of State can forward official notices required by law and other notices:	
Check here to have your email addre	ess excluded from requests for bulk data, to the extent allowed by Minnesota	law.
List a name and daytime phone number	er of a person who can be contacted about this form:	
Steven D. Kelley	763-745-3680	
Contact Name	Phone Number	
Entities that own, lease, or have any fi	nancial interest in agricultural land or land canable of being farmed	

Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the MN Dept. of Agriculture's Corporate Farm Program.

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed? Yes No 8

PATENT REEL: 042563 FRAME: 0013



Work Item 828869900026 Original File Number 194-AA

STATE OF MINNESOTA
OFFICE OF THE SECRETARY OF STATE
FILED
06/04/2015 11:59 PM

Steve Simon Secretary of State

Oteve Vimon

PATENT REEL: 042563 FRAME: 0014

RECORDED: 06/01/2017