

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT4770240

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	MERGER AND CHANGE OF NAME	
EFFECTIVE DATE:	01/01/2018	
CONVEYING PARTY DATA		
	Name	Execution Date
	QUALMARK CORPORATION	01/01/2018
NEWLY MERGED ENTITY DATA		
	Name	Execution Date
	ESPEC NORTH AMERICA, INC.	01/01/2018
MERGED ENTITY'S NEW NAME (RECEIVING PARTY)		
Name:	ESPEC NORTH AMERICA, INC.	
Street Address:	4141 CENTRAL PKWY	
City:	HUDSONVILLE	
State/Country:	MICHIGAN	
Postal Code:	49426	
PROPERTY NUMBERS Total: 5		
Property Type	Number	
Patent Number:	6112596	
Patent Number:	6105433	
Patent Number:	6062086	
Patent Number:	8485039	
Patent Number:	8616063	
CORRESPONDENCE DATA		
Fax Number:	(303)863-0223	
<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>		
Phone:	3038639700	
Email:	gschulz@sheridanross.com	
Correspondent Name:	SHERIDAN ROSS PC	
Address Line 1:	1560 BROADWAY	
Address Line 4:	DENVER, COLORADO 80202	
ATTORNEY DOCKET NUMBER:	5866-13;5866-14;5866-19	

NAME OF SUBMITTER:	BRADLEY M. KNEPPER
SIGNATURE:	/Bradley M. Knepper/
DATE SIGNED:	01/10/2018
Total Attachments: 5 source=ESPEC - CO Statement of Merger#page1.tif source=ESPEC - CO Statement of Merger#page2.tif source=ESPEC - CO Statement of Merger#page3.tif source=ESPEC - CO Statement of Merger#page4.tif source=ESPEC - CO Statement of Merger#page5.tif	

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Statement of Merger

(Surviving Entity is a Foreign Entity)

filed pursuant to § 7-90-203.7 and § 7-90-204.5 of the Colorado Revised Statutes (C.R.S.)

1. For each merging entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

(Caution: At least one merging entity must be an entity formed under the laws of Colorado.)

ID Number	19921025621
	(Colorado Secretary of State ID number)
Entity name or true name	Qualmark Corporation
Form of entity	Corporation
Jurisdiction	Colorado
Street address	10390 E 48th Ave.
	(Street number and name)
	Denver CO 80238
	(City) (State) (ZIP/Postal Code)
	United States
	(Province - if applicable) (Country)
Mailing address	
(leave blank if same as street address)	(Street number and name or Post Office Box information)
	(City) (State) (ZIP/Postal Code)
	(Province - if applicable) (Country)

ID Number	
	(Colorado Secretary of State ID number)
Entity name or true name	
Form of entity	

Jurisdiction

Street address

(Street number and name)

(City)

(State)

(ZIP/Postal Code)

(Province – if applicable)

(Country)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province – if applicable)

(Country)

ID Number

(Colorado Secretary of State ID number)

Entity name or true name

Form of entity

Jurisdiction

Street address

(Street number and name)

(City)

(State)

(ZIP/Postal Code)

(Province – if applicable)

(Country)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province – if applicable)

(Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

☐

There are more than three merging entities and the ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and the principal address of each additional merging entity is stated in an attachment.

2. For the surviving entity which is a foreign entity, its entity ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

(Caution: The surviving entity cannot be an entity formed under the laws of Colorado.)

ID Number

(Colorado Secretary of State ID number)

Entity name or true name ESPEC North America, Inc.

Form of entity Corporation

Jurisdiction Michigan

Street address 4141 Central Pkwy
(Street number and name)

Hudsonville MI 49426
(City) (State) (ZIP/Postal Code)

United States
(Province - if applicable) (Country)

Mailing address
(leave blank if same as street address) _____
(Street number and name or Post Office Box information)

(City) (State) (ZIP/Postal Code)

(Province - if applicable) (Country)

3. Each merging entity has been merged into the surviving foreign entity.

4. (If the following statement applies, adopt the statement by marking the box and state the appropriate document number(s).)

- ☐ One or more of the merging entities is a registrant of a trademark described in a filed document in the records of the secretary of state and the document number of each filed document is

Document number _____

Document number _____

Document number _____

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- ☐ There are more than three trademarks and the document number of each additional trademark is stated in an attachment.

5. (Mark the applicable box and complete the statement. **Caution:** Mark only one box.)

- ☐ The surviving foreign entity maintains a registered agent in this state.

OR

- ☐ The surviving foreign entity does not maintain a registered agent in this state and service of process may be addressed to the entity and mailed to the principal address pursuant to section 7-90-704 (2), C.R.S.

OR

- ☒ The surviving foreign entity has not maintained a registered agent in this state and appoints a registered agent to accept service pursuant to section 7-90-204.5, C.R.S. The person appointed as registered agent has consented to being so appointed. Such registered agent's name and address are

Name
(if an individual) _____
(Last) (First) (Middle) (Suffix)

OR

(if an entity) Corporation Service Company
(Caution: Do not provide both an individual and an entity name.)

Street address 1900 W. Littleton Boulevard
(Street number and name)

Littleton CO 80120
(City) (State) (ZIP Code)

Mailing address
(leave blank, if same as street address) (Street number and name or Post Office Box information)

(City) CO (State) (ZIP Code)

6. (If applicable, adopt the following statement by marking the box and include an attachment.)

☐ This document contains additional information as provided by law.

7. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are 01/01/2018 12:00 midnight EST.
(mm/dd/yyyy hour:minute am/pm)

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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 identified in this document as one who has caused it to be delivered.

8. The true name and mailing address of the individual causing this document to be delivered for filing are

Walter Kenneth
(Last) (First) (Middle) (Suffix)
4141 Central Pkwy
(Street number and name or Post Office Box information)

Hudsonville MI 49426
(City) (State) (ZIP/Postal Code)
United States
(Province - if applicable) (Country)

(If applicable, adopt the following statement by marking the box and include an attachment.)

☐ This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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