

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5331478

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	CHANGE OF NAME	
CONVEYING PARTY DATA		
	Name	Execution Date
	KEY PLASTICS L.L.C.	10/10/2017
RECEIVING PARTY DATA		
Name:	NOVARES US LLC	
Street Address:	19575 VICTOR PARKWAY	
Internal Address:	SUITE 400	
City:	LIVONIA	
State/Country:	MICHIGAN	
Postal Code:	48152	
PROPERTY NUMBERS Total: 1		
	Property Type	Number
	Application Number:	15674295
CORRESPONDENCE DATA		
Fax Number:	(517)372-6672	
<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:	313-225-7080	
Email:	patent@butzel.com	
Correspondent Name:	GEORGE T. SCHOOFF	
Address Line 1:	2410 WOODLAKE DRIVE	
Address Line 2:	SUITE 420	
Address Line 4:	OKEMOS, MICHIGAN 48864	
ATTORNEY DOCKET NUMBER:	149786-0001	
NAME OF SUBMITTER:	GEORGE T. SCHOOFF	
SIGNATURE:	/George T. Schooff/	
DATE SIGNED:	01/17/2019	
Total Attachments: 4		
source=Certificate of Amendment for Name Change#page1.tif		
source=Certificate of Amendment for Name Change#page2.tif		
source=Certificate of Amendment for Name Change#page3.tif		
source=Certificate of Amendment for Name Change#page4.tif		

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
FILING ENDORSEMENT

This is to Certify that the CERTIFICATE OF AMENDMENT TO THE ARTICLES OF ORG.

for

NOVARES US LLC

ID NUMBER: B07062

received by facsimile transmission on October 11, 2017 is hereby endorsed.

Filed on October 11, 2017 by the Administrator.

This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



Sent by Facsimile Transmission

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 11th day of October, 2017.

Julia Dale

Julia Dale, Director
Corporations, Securities & Commercial Licensing Bureau

CSCL/CD-715 (Rev. 02/17)

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU			
Date Received		(FOR BUREAU USE ONLY)	
		This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.	
Name Mark W. Peters			
Address Bodman PLC, 201 W. Big Beaver Rd., Suite 500			
City Troy	State MI	ZIP Code 48064	EFFECTIVE DATE:

Document will be returned to the name and address you enter above.
If left blank, document will be returned to the registered office.

CERTIFICATE OF AMENDMENT TO THE ARTICLES OF ORGANIZATION

For use by Limited Liability Companies
(Please read information and instructions on the last page)

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned execute the following Certificate of Amendment:

1. The present name of the limited liability company is:

KEY PLASTICS L.L.C.

2. The identification number assigned by the Bureau is:

B07062

3. The date of filing the original Articles of Organization was: September 17, 1996

4. Article 1 of the Articles of Organization is hereby amended to read as follows:

"The name of the limited liability company is NOVARES US LLC."

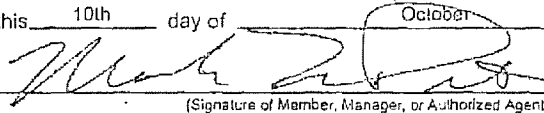
5. ☐ The amendment was approved by a majority in interest if an operating agreement authorizes amendment of the articles of organization by majority vote.

☒ The amendment was approved by unanimous vote of all the members entitled to vote.

This document is hereby signed as required by Section 103 of the Act.

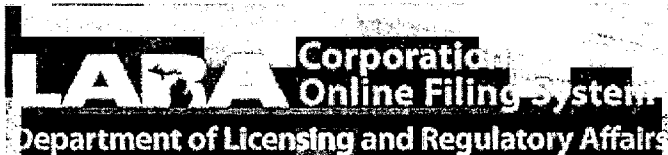
Signed this 10th day of October, 2017

By


(Signature of Member, Manager, or Authorized Agent)

Mark W. Peters, Assistant Secretary, KEY PLASTICS L.L.C.

(Type or Print Name and Capacity)

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ID Number: 801084246

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Summary for: NOVARES US LLC

The name of the DOMESTIC LIMITED LIABILITY COMPANY: NOVARES US LLC

The name was changed from: KEY PLASTICS L.L.C. on 10-11-2017

The name was changed from: KEY PLASTICS TECHNOLOGY, L.L.C. on 02-10-1998

Entity type: DOMESTIC LIMITED LIABILITY COMPANY

Identification Number: 801084246 Old ID Number: B07062

Date of Organization in Michigan: 09/17/1996

Purpose: All Purpose Clause

Term: Perpetual

The name and address of the Resident Agent:

Resident Agent Name: RACHEL BURNS

Street Address: 19575 VICTOR PARKWAY, SUITE 400

Apt/Suite/Other:

City: LIVONIA

State: MI

Zip Code: 48152

Registered Office Mailing address:

P.O. Box or Street Address:

Apt/Suite/Other:

City:

State:

Zip Code:

Act Formed Under: 023-1993 Michigan Limited Liability Company Act

Managed By:

Members

[View Assumed Names for this Business Entity](#)**View filings for this business entity:**

ALL FILINGS
ANNUAL REPORT/ANNUAL STATEMENTS
CERTIFICATE OF CORRECTION
CERTIFICATE OF CHANGE OF REGISTERED OFFICE AND/OR RESIDENT AGENT
RESIGNATION OF RESIDENT AGENT
CERTIFICATE OF ASSUMED NAME

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