OP \$40.00 1965348

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM386805

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Rovcal, Inc.		06/08/2011	Corporation: CALIFORNIA

RECEIVING PARTY DATA

Name:	Rovcal, LLC
Street Address:	601 Rayovac Drive
City:	Madison
State/Country:	WISCONSIN
Postal Code:	53711
Entity Type:	Limited Liability Company: CALIFORNIA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	1965348	PRO LINE

CORRESPONDENCE DATA

Fax Number: 4048156555

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.

Phone: 404-815-6500

Email: nedwards@kilpatricktownsend.com

Correspondent Name: Michael W. Rafter

Address Line 1: 1100 Peachtree Street, Suite 2800
Address Line 2: Kilipatrick Townsend & Stockton LLP

Address Line 4: Atlanta, GEORGIA 30309

NAME OF SUBMITTER: Nancy S. Edwards	
SIGNATURE:	/Nancy S. Edwards/
DATE SIGNED:	06/06/2016

Total Attachments: 1

source=Conversion Rovcal Inc to Rovcal LLC#page1.tif

TRADEMARK REEL: 005808 FRAME: 0614

LLC-1A



RECORDED: 08/22/2016

State of California Secretary of State

File # _____

Limited Liability Company Articles of Organization - Conversion

IMPORTANT — Read all instructions before completing this form.

This Space For Filing Use Only

IMPORTANT — Read all histractions before completing this form.					
Converted Entity Information					
1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," or the abbreviations "LLC" or "L.L.C." The words "Limited" and "Company" may be abbreviated to "Ltd." and "Co.," respectively.)					
Rovcal, LLC					
2. THE PURPOSE OF THE LIMITED LIABILTY COMPANY MAY BE ORGANIZED UNDER	THE BEVERLY-KILLEA LIMITED LIA	LAWFUL ACT OR ACT BILITY COMPANY ACT	I IVITY FOR WHICH A LIMITED LIABILITY		
3. THE LIMITED LIABILITY COMPANY WILL E	BE MANAGED BY (Check only one)				
✓ ONE MANAGER	MORE THAN ONE MANAGER	ALL	LIMITED LIABILITY COMPANY MEMBER(S)		
4. MAILING ADDRESS OF THE CHIEF EXECU	JTIVE OFFICE	CITY	STATE ZIP CODE		
811 N. Kelsey Street, Suite 101		Visalia	CA 93291		
in California or a corporation that has filed a the agent's business or residential address the individual or corporate agent. Check the	certificate pursuant to California Corp in California. Item 7: If the converting	orations Code section 1 g entity is a California li	ocess. The agent may be an individual residing 505. Item 6: If the agent is an individual, enter mited partnership, enter the mailing address of ess is the same as the address in Item 6.)		
CT Corporation System		<u> </u>			
6. IF AN INDIVIDUAL, ADDRESS OF AGENT	FOR SERVICE OF PROCESS IN CA	CITY	STATE ZIP CODE CA		
7. MAILING ADDRESS OF AGENT FOR SER	VICE OF PROCESS	CITY	STATE ZIP CODE		
l	TOD SEDIMOT OF PROCESS IS THE ST	ME AS THE ASSENTED DAYS	SINESS OR RESIDENTIAL ADDRESS IN ITEM S		
	FUR SERVICE OF PROCESS IS THE SA	MIC NO THE AGENT'S BUS	SINESS OR RESIDENTIAL ADDRESS IN ITEM 6.		
Converting Entity Information					
8. NAME OF CONVERTING ENTITY					
Rovcal, Inc.	10. JURISDICTION	11 CA SECE	RETARY OF STATE FILE NUMBER, IF ANY		
9. FORM OF ENTITY	California	Th. OAGEOF	C2063405		
Corporation		VOTE OF THE NI IMPE			
THAT EQUALED OR EXCEEDED THE VOTE	12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS: STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS				
	STANDING INTERESTS ENTITLED TO	VOIE AND INE PER	Simple Majority (>50%)		
Common Stock (1,000 shares)			Simple majority (* 5070)		
Additional Information					
13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.					
14. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. DATE DATE					
Anthony Genito, Vice President					
SIGNATURE OF AUTHORIZED PERSON TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON					
Nathan Fagre, Secretary					
SIGNATURE OF AUTHORIZED PERSON TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON					
	SIGNATORE SI NOTHORIZZO PERSON				
LLC-1A (REV 04/2010)			APPROVED BY SECRETARY OF STATE		

TRADEMARK REEL: 00**5**809 FRAME: 0**639**