## 06-03-1998

RI ET FORM PTO-1594 U.S. DEPARTMENT OF COMMERCE (7/97)Patent and Trademark Office 100726989 To the Honorable Commissioner of Patents and Trademarks: Please Record the attached original documents or copy thereof. 2. Name and address of receiving pay Name of conveying party(ies): MAY 19 Arthur Andersen & Co. Arthur Andersen LLP Entity: General Partnership of Illinois Address: 69 West Washingt Additional name(s) of conveying party(ies) attached? Chicago, Illinois 606 □ Yes ⋈ No. 3. Nature of conveyance: Entity: Limited Liability Partnership of Illinois □ Assignment Merger Security Agreement ☑ Change of Name If assignee is not domiciled in the United States, an appointment □ Other of domestic representative is attached: 

Yes 

No Date: September 1, 1994 Additional name(s) & address(es) attached: ☐ Yes ☒ No 4. Application or Registration number(s): B: Trademark Registration No.(s) Trademark Application No.(s) 1,748,188 Additional numbers attached? ☐ Yes Ø No 6. Total number of trademark applications 5. Name and address of party to whom correspondence concerning document should be mailed: and registrations involved: \_1\_ Hill & Simpson, P.C. Attn: Trademark Department 85th Floor-Sears Tower ⋈ Enclosed Chicago, IL 60606 Any additional fees or credits are authorized to be charged. to deposit account. A duplicate copy of this page is attached for use when applicable. Att. Ref. No(s).: T95,3218 8. Deposit Account Number: 06/01/1998 JSHABAZZ 00000121 1748188 08-2290 01 FC:481 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. May 18, 1998 Edward A. Lehman Name of Person Signing Date

Washington, D.C. 20231

Commissioner of Patents and Trademarks
Box Assignments

Mail documents to be recorded and required cover sheet information to:

Total number of pages including cover sheet, attachments and document:\_

George H. Ryan Secretary of State	Illinois UNIFORM PARTNERSHIP ACT APPLICATION for REGISTRATION of LIMITED LIABILITY PARTNERSHIP	This space for use by Secretary of State					
Business Services		AXHIBIT A					
Uniform Partnership Rm. 357, Howlett Bldg.	Must be typewritten						
Springfield, IL. 62756	This space for use by Secretary of State $9 - 1 - 94$	FILED					
	Assigned File #: OCO-COY	SEP -1 1994					
	Date: Assigned File #: 000-004 Filing Fee \$ 500000 Approved:	SECRETARY OF STATE!					
P. yment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to the "Secretary of State".							
Federal employer identific	ation number (F.E.I.N.): 36-0732690	SEP - 1 1994					
(The name of the regis "Registered Limited I designation "LLP" as  2. The address, including	Liability Partnership name is Arthur Anderstered limited liability partnership shall caliability Partnership" or the abbreviation "the last words or letters of its name.)  county, of its principal office: (Post off West Washington Street	ontain the words L.L.P." or the					
	icago, Illinois 60602						
Illinois Registered Ag Illinois Registered Of (P.O. Box alone and c/ unacceptable)	fice: 33 West Monroe Street						
.) Total number of partne							
Fee per partner x \$100.00  Total filing fee \$5,000  (In no event shall the fee exceed \$5,000.00.)							
Include the business of		LP provides accounting, tax ing, corporate finance and					

\* The number of partners is1,163. This includes individuals who are designated as "partners" and individuals who are designated as "participating principals" or "national directors" of the partnership (because of their special contractual relations with the partnership), and has been used solely for purposes of this application and qualifying as a registered limited liability partnership. The feeling paid in connection with the filing of this application has been calculated

KLJP	<b></b> '	8	1

- 6. The partnership hereby applies for status as a registered limited liability partnership.
- 7. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this registration application is to the best of my knowledge and belief, true, correct and complete.

Dated	September 1	_19	<u></u> •		
•	Signature and Name		Business Address		
1. By	: Blichard Brown	1.	69 West Washington Street		
	Signature		Number	Street	
_R	R. Richard Brown. Partner (Type or print name and title)		Chicago, IL 60602 City/Town		
			Illinois State	60602	
(N	ame if corporation or other entity)		State	Zip Code	
2.		2.			
	Signature		Number	Street	
	(Type or print name and title)		City/Town		
78	ame if corporation or other entity)		State	Zip Code	

The Registration Application shall be executed by a majority in interest of the partners or by one or more partners authorized to execute the application.

TRADEMARK REEL: 1734 FRAME: 0601

Sway & Pyon GEORGE H. RYAN SECRETARY OF STATE

DATED! Vine 12, 1995

BY Janifu L. Bordus

AUG 35

TRADEMARK REEL: 1734 FRAME: 0602

## **AFFIDAVIT**

We, Arthur Andersen LLP, a limited liability partnership organized and existing under the laws of the State of Illinois, U.S.A., having its principal place of business at 69 West Washington Street, Chicago, Illinois 60602, U.S.A., do hereby declare that the said limited liability partnership changed its name and status from Arthur Andersen & Co., an Illinois general partnership, on the 1st day of September 1994 by filing the document attached as Exhibit A with the Secretary of State of Illinois.

Arthur Andersen LLF

By: Nober

Robert I. Pender

(type name)

Sworn to and subscribed before me on this latted ay of July

, 1995.

Matany Bublio

**SEAL** 

OFFICIAL SEAL "
CECRGIANN MELCHIORRE
STARY PUBLIC, STATE OF ILLINOIS
COMMISSION EXPIRES 4/22/96

RECORDED: 05/19/1998