

04-27-2001



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4.12.01

**RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY**

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

**Submission Type**

- ☒ New  
☐ Resubmission (Non-Recordation)  
Document ID#   
☐ Correction of PTO Error  
Reel #  Frame #   
☐ Corrective Document  
Reel #  Frame #

**Conveyance Type**

- ☐ Assignment ☐ License  
☐ Security Agreement ☐ Nunc Pro Tunc Assignment  
☐ Merger  
☒ Change of Name  
☐ Other   
Effective Date  
Month Day Year  
**March 9, 2000**

**Conveying Party**

☐ Mark if additional names of conveying parties attached

Name **Waukesha Cutting Tools, Inc.**

Execution Date  
Month Day Year  
**March 9, 2000**

Formerly

74530437

- ☐ Individual ☐ General Partnership ☐ Limited Partnership ☒ Corporation ☐ Association  
☐ Other   
☒ Citizenship/State of Incorporation/Organization **Wisconsin**

**Receiving Party**

☐ Mark if additional names of receiving parties attached

Name **Walter Waukesha, Inc.**

DBA/AKA/TA

Composed of

Address (line 1) **1111 Sentry Drive**

Address (line 2)

Address (line 3) **Waukesha**

**Wisconsin**

**53186-5979**

City

State/Country

Zip Code

- ☐ Individual ☐ General Partnership ☐ Limited Partnership ☐ If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)  
☒ Corporation ☐ Association  
☐ Other   
☒ Citizenship/State of Incorporation/Organization **Wisconsin**

**FOR OFFICE USE ONLY**

04/25/2001 6TON11 00000168 74530437

01 FC:481  
02 FC:482

40.00 DP  
75.00 DP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

**Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231**

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#

**Trademark Application Number(s) or Registration Number(s)**

☐ Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

**Registration Number(s)**

74/530,437	75/554,294	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>

1,150,816	1,879,111	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties**

Enter the total number of properties involved.

#

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed ☒

Deposit Account ☐

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes ☒

No ☐

**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. Charges to deposit account are authorized, as indicated herein.*

Rachel S. Jozefacki

Name of Person Signing

  
Signature

April 9, 2001

Date Signed

RECEIVED

1008266

MAR 22 2000

WISCONSIN  
DFI

ARTICLES OF AMENDMENT  
TO ARTICLES OF INCORPORATION  
OF  
WAUKESHA CUTTING TOOLS, INC.

The undersigned authorized officer of Waukesha Cutting Tools, Inc., a Wisconsin corporation ("Corporation") incorporated under the Wisconsin Business Corporation Law, Chapter 180 of the Wisconsin Statutes, hereby certifies that, in accordance with all applicable provisions of the Wisconsin Business Corporation Law as described below:

(1) The name of the Corporation prior to any change effected by these Articles of Amendment is Waukesha Cutting Tools, Inc.

(2) The First Article of such Corporation's Articles of Incorporation, filed in the Office of the Wisconsin Secretary of State on June 27, 1957, is amended and restated to read in its entirety as follows:

"The name of the corporation is Walter Waukesha, Inc."

(3) The foregoing Amendment was adopted by the Board of Directors and the Shareholders of the Corporation effective as of March 9, 2000 in accordance with Section 180.1003 of the Wisconsin Statutes.

IN WITNESS WHEREOF, the undersigned has executed and subscribed these Articles of Amendment on behalf of the Corporation and does affirm the foregoing as true as of the 9<sup>th</sup> day of March, 2000.

WALTER WAUKESHA, INC.  
(f/k/a Waukesha Cutting Tools, Inc.)

By: \_\_\_\_\_

Name: Muri Tanriverdi

Title: President and Chief Executive Officer

TRX 0001196322 Amount \$40.00

Attest: \_\_\_\_\_

Name: Gary Mayer

Title: Secretary and Treasurer

ACCT 00000614 CLASS CODE 340

TRX 0001196323 Amount

RECEIVED  
DEPT OF  
FINANCIAL INSTITUTIONS  
STATE OF WISCONSIN  
MAR 22 AM 8:00

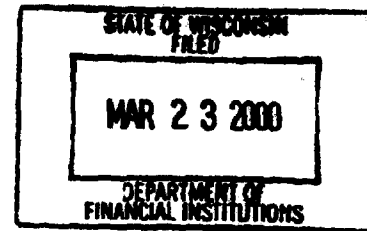
TRADEMARK

REEL: 002283 FRAME: 0515

\$40.00 + \$25.00 *Eq*

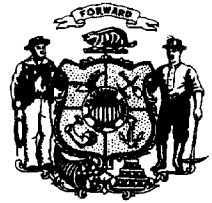
**ARTICLES OF  
AMENDMENT**

*chap. 180*



*- Name Change -*

*Joan Ross  
Foley & Lardner  
777 E. Wisconsin Ave  
Milwaukee WI 53202-5367*



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that the annexed copy has been compared with the document on file in the Corporation Section of the Division of Corporate & Consumer Services of this department, and that the same is a true copy thereof; and that I am the legal custodian of said document, and that this certification is in due form.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed the official seal  
of the Department.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Administrator  
Division of Corporate & Consumer Services  
Department of Financial Institutions

DATE: MAR 30 2001

BY: A handwritten signature in black ink, appearing to read "Patricia Weber".

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Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.