

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Liaison Council on Certification for the Surgical Technologist		01/11/2006	Nonprofit Corporation: COLORADO

RECEIVING PARTY DATA

Name:	National Board of Surgical Technology and Surgical Assisting
Street Address:	6 West Dry Creek Circle
Internal Address:	Suite 100
City:	Littleton
State/Country:	COLORADO
Postal Code:	80120
Entity Type:	Nonprofit Corporation: COLORADO

PROPERTY NUMBERS Total: 13

Property Type	Number	Word Mark
Serial Number:	78514332	CSFA
Serial Number:	78788704	NATIONAL BOARD OF SURGICAL TECHNOLOGY AND SURGICAL ASSISTING
Serial Number:	78788489	CST-OS
Serial Number:	78788486	CFA-CVS
Serial Number:	78788288	CST-CVS
Serial Number:	78788262	CST-OS
Serial Number:	78788255	CFA-CVS
Serial Number:	76475795	LIAISON COUNCIL ON CERTIFICATION FOR THE SURGICAL TECHNOLOGIST
Serial Number:	76475794	LIAISON COUNCIL ON CERTIFICATION FOR THE SURGICAL TECHNOLOGIST
Serial Number:	75349326	CERTIFIED SURGICAL TECHNOLOGIST
Serial Number:	75350345	CERTIFIED FIRST ASSISTANT

CH \$340.00 78514332

Serial Number:	74283061	CFA
Serial Number:	74282940	CST

CORRESPONDENCE DATA

Fax Number: (303)863-0223
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
Phone: 303-863-9700
Email: mtrudell@sheridanross.com
Correspondent Name: Miriam D. Trudell
Address Line 1: 1560 Broadway, Suite 1200
Address Line 4: Denver, COLORADO 80202

ATTORNEY DOCKET NUMBER:	3710-19
NAME OF SUBMITTER:	Miriam D. Trudell
Signature:	/Miriam D. Trudell/
Date:	04/24/2006

Total Attachments: 3
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Colorado Secretary of State
 Date and Time: 01/11/2006 01:58 PM
 Entity Id: 19921054189
 Document number: 20061018484

Document processing fee
 If document is filed on paper \$125.00
 If document is filed electronically \$ 25.00

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Articles of Amendment

filed pursuant to §7-90-301, et seq. and §7-130-105 of the Colorado Revised Statutes (C.R.S.)

- ID number 19921054189
1. Entity name LIAISON COUNCIL ON CERTIFICATION FOR THE SURGICAL TECHNOLOGIST
(If changing the name of the corporation, indicate name BEFORE the name change)
2. New Entity name (if applicable) National Board of Surgical Technology and Surgical Assisting
3. *(If the following statement applies, adopt the statement by marking the box and include an attachment.)*
 Other amendments are attached.

4. If the nonprofit corporation's period
 of duration as amended is less than
 perpetual, state the date on which the
 period of duration expires _____
(mm/dd/yyyy)

OR

If the nonprofit corporation's period of duration as amended is perpetual, mark this box

5. *(Optional)* Delayed effective date _____
(mm/dd/yyyy)

6. Additional information may be included pursuant to other organic statutes such as title 12, C.R.S. If applicable, mark this box and include an attachment stating the additional information.

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7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing

James Thomas M
(Last) *(First)* *(Middle)* *(Suffix)*

90 South Cascade Avenue
(Street name and number or Post Office Box information)

Suite 1400

Colorado Springs CO 80903
(City) *(State)* *(Postal/Zip Code)*

United States
(Country – if not US)

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