# 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
THE AFFINITY GROUP, INC.		09/17/2004	CORPORATION: COLORADO

## RECEIVING PARTY DATA

Name:	FISERV INVESTMENT SUPPORT SERVICES, INC.
Street Address:	255 Fiserv Drive
City:	Brookfield
State/Country:	WISCONSIN
Postal Code:	53045
Entity Type:	CORPORATION: COLORADO

#### PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	2125657	THE COMPLETE FINANCIAL MANAGEMENT WORKSHOP

## **CORRESPONDENCE DATA**

Fax Number: (414)277-0656

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

414-271-6560 Phone:

Email: mkeipdocket@michaelbest.com

Correspondent Name: Billie Jean Smith

100 East Wisconsin Avenue Address Line 1:

Address Line 2: Suite 3300

Address Line 4: Milwaukee, WISCONSIN 53202

ATTORNEY DOCKET NUMBER:	034083-9216 US00
NAME OF SUBMITTER:	Jaime L. Puls
Signature:	/jaime I. puls/
Date:	10/19/2007

**REEL: 003643 FRAME: 0126** 

TRADEMARK 900089697

Total Attachments: 2 source=A2302531#page1.tif source=A2302531#page2.tif

> TRADEMARK REEL: 003643 FRAME: 0127

Document Processing Fee If document is on paper: If document is filed electronically: Fees are subject to change. For electronic filing and to obtain copies of filed documents visit www.sog.statc.co.us Deliver paper documents to: Colorado Secretary of State Business Division 1560 Broadway, Suite 200 Denver, CO 80202-5169 Paper documents must be typed or machine prin	\$25.00 Currently Not Available ted.	20041727858 C 3 25.00 SECSETWAY OF STRIE 09-17-2009 11402900 ABOVE SPACE FOR OFFICE USE ONLY
	Articles of Amendment eq. and §7-110-106 of the Colorado Revised	I Statutes (C.R.S.)
ID number:	19901107018	
1. Entity name:		
	The Affinity Group, Inc.	
	(If changing the name of the corporation BEFORE the name change)	
2. New Entity name: (if applicable)	Fiserv Investment Support S	ervices, Inc.
3. Use of Restricted Words (if any of these terms are contained in an entity name, true name of an entity, trade name or trademark stated in this document, make the applicable selection):	☐ "bank" or "trust" or any derivative th☐ "credit union" ☐ "savings ar☐ "insurance", "casualty", "mutual", or	nd loan"
4. Other amendments, if any, are attached	i.	
5. If the amendment provides for an exchange states the provisions for implementing	ange, reclassification or cancellation of issu the amendment.	ed shares, the attachment
6. If the corporation's period of duration as amended is less than perpetual, state the date on which the period of duratic expires:		
OR		
If the corporation's period of duration	as amended is perpetual, mark this box:	
7. (Optional) Delayed effective date:	(mm/dd/yyyy)	
Notice:		

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic

Rev. 7/13/2004 1 of 2

TRADEMARK REEL: 003643 FRAME: 0128 statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

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

Low	John	W.	Mr
(Last) 633 17th Street:	(First) , #3000	(Middle)	(Suffix)
(Street name and n	number or Post Office info	mation)	
Denver	CO	80202	
		10 100 0 1.	
(Ciţy)	(State)	(Postal/Zip Code)	

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box and include an attachment stating the name and address of such individuals.)

#### Disclaimer:

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Rev. 7/13/2004 2 of 2

TRADEMARK REEL: 003643 FRAME: 0129

**RECORDED: 10/19/2007**