

TIS/MADRID ASSIGNMENT

Electronic Version v1.0  
Stylesheet Version v1.0

SUBMISSION TYPE:	NEW ASSIGNMENT	<b>APPLICATION NUMBER</b> <b>79040139</b>										
NATURE OF CONVEYANCE:	CHANGE OF NAME											
CONVEYING PARTY DATA												
<table border="1"><thead><tr><th>Name</th><th>Execution Date</th></tr></thead><tbody><tr><td>Gunnebo Troax AB</td><td>02/08/2011</td></tr></tbody></table>			Name	Execution Date	Gunnebo Troax AB	02/08/2011						
Name	Execution Date											
Gunnebo Troax AB	02/08/2011											
RECEIVING PARTY DATA												
<table border="1"><tr><td>Name:</td><td>Troax AB</td></tr><tr><td>Address:</td><td>P.O. Box 89 SE-330 33 Hillerstorp</td></tr><tr><td>Country:</td><td>SE</td></tr><tr><td>Entity Type:</td><td></td></tr><tr><td>Entity Country:</td><td>SE</td></tr></table>			Name:	Troax AB	Address:	P.O. Box 89 SE-330 33 Hillerstorp	Country:	SE	Entity Type:		Entity Country:	SE
Name:	Troax AB											
Address:	P.O. Box 89 SE-330 33 Hillerstorp											
Country:	SE											
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Entity Country:	SE											
CORRESPONDENCE DATA												
Correspondent Name:	Troax AB											
Address:	P.O. Box 89 SE-330 33 Hillerstorp											
Country:	SE											

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