

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	RELEASE BY SECURED PARTY		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
BMO Harris Bank	FORMERLY Lincoln State Bank	11/20/2008	INC. ASSOCIATION: WISCONSIN
RECEIVING PARTY DATA			
Name:	Laux Holdings LLC		
Also Known As:	Laux Holding LLC		
Street Address:	20975 Swenson Drive		
City:	Waukesha		
State/Country:	WISCONSIN		
Postal Code:	53186		
Entity Type:	LIMITED LIABILITY COMPANY: WISCONSIN		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	1652939	TECHLINK	
CORRESPONDENCE DATA			
Fax Number:	2026725399		
	<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>		
Phone:	2026725300		
Email:	PTOMailWashington@foley.com		
Correspondent Name:	Norm J. Rich		
Address Line 1:	Foley & Lardner LLP		
Address Line 2:	3000 K Street, NW 6th Flr		
Address Line 4:	Washington, DISTRICT OF COLUMBIA 20007		
ATTORNEY DOCKET NUMBER:	058625-0114		
NAME OF SUBMITTER:	Norm J. Rich		

OP \$40.00 1652939

Signature:	/Norm J. Rich/
Date:	05/23/2012
Total Attachments: 3 source=Lien Release TECHLINK 1652939#page1.tif source=Lien Release TECHLINK 1652939#page2.tif source=Lien Release TECHLINK 1652939#page3.tif	

UCC FINANCING STATEMENT AMENDMENT



NAME & PHONE OF CONTACT Diligenz Inc Diligenz Inc. FilingDept@Diligenz.com 800-858-5294
SEND ACKNOWLEDGMENT TO: Diligenz Inc Diligenz Inc. FilingDept@Diligenz.com

Filing # - 070004726423
 Filed - 4/4/2007 3:27:27 PM
 Wisconsin Department of Financial Institutions

INITIAL FINANCING STATEMENT FILE #
 060016182321

AMENDMENT (PARTY INFORMATION): This Amendment affects Debtors of record.

CURRENT RECORD INFORMATION:

DEBTOR'S NAME LAUX HOLDINGS LLC

CHANGED RECORD INFORMATION:

OR	ORGANIZATION'S NAME METRIX LLC				
	INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
MAILING ADDRESS 20975 SWENSON DR S'VE 400		CITY WAUKESHA	STATE WI	POSTAL CODE 53186	COUNTRY UNITED STATES
ADD'L INFO RE ORGANIZATION DEBTOR	TYPE OF ORGANIZATION Limited Liability Company	JURISDICTION OF ORGANIZATION Wisconsin	ORGANIZATIONAL ID #, IF ANY L041608		

NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT

OR	ORGANIZATION'S NAME Lincoln State Bank			
	INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

OPTIONAL FILER REFERENCE DATA

9605513-3000/3001 [25485584]

Filing # - 080016009723

Filed - 11/20/2008 10:25 AM

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Wisconsin Department of
Financial Institutions

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone (800) 331-3282 Fax (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 11193 HARRIS BANK BU	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	16499311 WISC

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 060016182321 06-NOV-2006 SS WI	1b. This FINANCING STATEMENT AMENDMENT IS to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
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2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. **ASSIGNMENT (full or partial):** Give name of assignee in item 7e or 7b and address of assignee in 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7:
 CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.
 DELETE name: Give record name to be deleted in item 6a or 6b
 ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable)

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME LAUX HOLDINGS LLC				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d. SEE INSTRUCTION	ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE
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8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.
Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the existing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME LINCOLN STATE BANK				
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10. OPTIONAL FILER REFERENCE DATA
16499311 Debtor Name: LAUX HOLDINGS LLC MMBC UCC Migration 6368/METRIX LLC

TRADEMARK
REEL: 004786 FRAME: 0534

RECORDED: 05/23/2012