

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM406314

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Northwest Evaluation Association		09/29/2016	Corporation: OREGON
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	NWEA		
<b>Street Address:</b>	121 NW Everett St		
<b>City:</b>	Portland		
<b>State/Country:</b>	OREGON		
<b>Postal Code:</b>	97209		
<b>Entity Type:</b>	Non-Profit Corporation: OREGON		
<b>PROPERTY NUMBERS Total: 7</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	3468952	KEEPING LEARNING ON TRACK	
<b>Registration Number:</b>	3711159	POWER OF TEACHING	
<b>Registration Number:</b>	3983889	PARTNERING TO HELP ALL KIDS LEARN	
<b>Registration Number:</b>	3343646	KEEPING LEARNING ON TRACK	
<b>Registration Number:</b>	4050973	LEARNING PLANS ON DEMAND	
<b>Registration Number:</b>	4782919	SKILLS NAVIGATOR	
<b>Registration Number:</b>	4197621	SKILLS POINTER	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Email:</b>	ben.buhayar@nwea.org		
<b>Correspondent Name:</b>	Ben Buhayar		
<b>Address Line 1:</b>	121 NW Everett St		
<b>Address Line 4:</b>	Portland, OREGON 97209		
<b>NAME OF SUBMITTER:</b>	Benjamin Buhayar		
<b>SIGNATURE:</b>	/Benjamin Buhayar/		
<b>DATE SIGNED:</b>	11/22/2016		

OP \$190.00 3468952

**Total Attachments: 3**

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Secretary of State  
Corporation Division  
255 Capitol Street NE, Suite 151  
Salem, OR 97310-1327

Phone: (503)986-2200  
www.filinginoregon.com

Registry Number: 120852-13  
Type: DOMESTIC NONPROFIT CORPORATION

Next Renewal Date: 04/22/2017

NWEA  
121 SW MORRISON STREET SUITE 600  
PORTLAND OR 97204

### Acknowledgment Letter

The document you submitted was recorded as shown below. Please review and verify the information listed for accuracy.

**Document**  
ARTICLES OF AMENDMENT

**Filed On**  
09/29/2016

**Jurisdiction**  
OREGON

**Nonprofit Type**  
PUBLIC BENEFIT

**Name**  
NWEA

**Principal Place of Business**  
121 NW EVERETT ST  
PORTLAND OR 97209

**Registered Agent**  
MARK R WADA  
121 SW MORRISON STREET STE 600  
PORTLAND OR 97204

**Mailing Address**  
121 SW MORRISON STREET SUITE 600  
PORTLAND OR 97204

**President**  
JEFF STRICKLER  
121 NW EVERETT ST  
PORTLAND OR 97209

**Secretary**  
JEFF STRICKLER  
121 NW EVERETT ST  
PORTLAND OR 97209



Articles of Amendment - Nonprofit  
Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - <http://www.FilingInOregon.com> - Phone: (503) 986-2200

**FILED**

SEP 29 2016

OREGON  
SECRETARY OF STATE

REGISTRY NUMBER: 120852-13

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink.

1) ENTITY NAME: Northwest Evaluation Association

2) STATE THE ARTICLE NUMBER(S): and set forth the article(s) as it is amended to read. (Attach a separate sheet if necessary.)  
See Exhibit A attached hereto

3) THE AMENDMENT WAS ADOPTED ON: Sept 28, 2016  
(If more than one amendment was adopted, identify the date of adoption of each amendment.)

4) CHECK THE APPROPRIATE STATEMENT:

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required.

The membership vote was as follows:

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

5) EXECUTION: (Must be signed by at least one officer or director.)

By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature:

DocuSigned by:

Jeff Strickler

Printed Name:

Jeff Strickler

Title:

President & COO

40C05D7C74164F9...

CONTACT NAME: (To resolve questions with this filing.)

Brenda Ayers

PHONE NUMBER: (Include area code.)

503-226-1191

**FEES**

Required Processing Fee \$50

No Fee for Nonprofit Type Change.

Processing Fees are nonrefundable. Please make check payable to "Corporation Division."

Free copies are available at [FilingInOregon.com](http://FilingInOregon.com), using the Business Name Search program.

**EXHIBIT A**  
**AMENDMENT TO AMENDED AND RESTATED ARTICLES OF INCORPORATION**  
**OF**  
**NORTHWEST EVALUATION ASSOCIATION**

Article I of the Amended and Restated Articles of Incorporation of Northwest Evaluation Association is hereby amended by deleting such Article I in its entirety and replacing it with the following:

**“ARTICLE I**

The name of the corporation is **NWEA** and its duration shall be perpetual.”

2642175/1/BMW/103587-0001