

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM406630

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Belcan Corporation		09/24/2015	Corporation: OHIO
RECEIVING PARTY DATA			
Name:	Belcan, LLC		
Street Address:	10200 Anderson Way		
City:	Cincinnati		
State/Country:	OHIO		
Postal Code:	45242		
Entity Type:	Limited Liability Company: OHIO		
PROPERTY NUMBERS Total: 5			
Property Type	Number	Word Mark	
Registration Number:	1422240	BELCAN	
Registration Number:	2739794	PVDCOLLECT	
Registration Number:	2739795	PVDNET	
Registration Number:	2800485	PVDFIELD	
Registration Number:	2800484	PVDMANAGE	
CORRESPONDENCE DATA			
Fax Number:	5135796457		
<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>			
Phone:	5135621401		
Email:	mhurst@kmlaw.com		
Correspondent Name:	J. Michael Hurst		
Address Line 1:	One East Fourth Street, Suite 1400		
Address Line 4:	Cincinnati, OHIO 45202		
NAME OF SUBMITTER:	J. Michael Hurst		
SIGNATURE:	/j. michael hurst/		
DATE SIGNED:	11/28/2016		
Total Attachments: 10			
source=Belcan Certification of Conversion#page1.tif			

OP \$140.00 1422240

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source=Belcan Certification of Conversion#page10.tif



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
09/25/2015	201526800636	Conversion Within SOS Records (CVS)	99.00	200.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

CT CORPORATION SYSTEM
JAMES H TANKS III
4400 EASTON COMMONS WAY SUITE 125
COLUMBUS, OH 43219

**STATE OF OHIO
CERTIFICATE**

**Ohio Secretary of State, Jon Husted
788860**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
BELCAN, LLC

and, that said business records show the filing and recording of:

Document(s)

Conversion Within SOS Records

Effective Date: 09/24/2015

CHANGE BUSINESS TYPE DOM. PROFIT LIM. LIAB. CO.

Document No(s):

201526800636



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
25th day of September, A.D. 2015.

Ohio Secretary of State



Form 700 Prescribed by:
JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Makes checks payable to Ohio Secretary of State

Mail this form to one of the following:
Regular Filing (non expedite)
P.O. Box 1329
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Certificate for Conversion for Entities Converting Within or Off the Records of the Ohio Secretary of State Filing Fee: \$125

(CHECK ONLY ONE (1) BOX)

(1) Converting Within The Records of the Ohio Secretary of State

(2) Converting Off The Records of the Ohio Secretary of State

(187-VXX)

Name of the converting entity:

Jurisdiction of Formation:

Charter/Registration Number:

The converting entity is a:
(Check Only (1) One Box)

<input checked="" type="checkbox"/> Domestic Corporation (For-Profit or Nonprofit)	<input type="checkbox"/> Partnership
<input type="checkbox"/> Foreign Corporation (For-Profit or Nonprofit)	<input type="checkbox"/> Domestic Limited Partnership
<input type="checkbox"/> Domestic Nonprofit Limited Liability Company	<input type="checkbox"/> Foreign Limited Partnership
<input type="checkbox"/> Foreign Nonprofit Limited Liability Company	<input type="checkbox"/> Domestic Limited Liability Partnership
<input type="checkbox"/> Domestic For-Profit Limited Liability Company	<input type="checkbox"/> Foreign Limited Liability Partnership
<input type="checkbox"/> Foreign For-Profit Limited Liability Company	

The converting entity hereby states that it has complied with all laws in the jurisdiction under which it exists and that those laws permit the conversion.

2015 SEP 24 PM 3:50
DELIVERED

Name of the converted entity

Jurisdiction of Formation

The converted entity is a:
(Check Only (1) One Box)

Domestic Corporation (For-Profit) Partnership

Foreign Corporation (For-Profit or Nonprofit) Domestic Limited Partnership

Domestic Nonprofit Limited Liability Company Foreign Limited Partnership

Foreign Nonprofit Limited Liability Company Domestic Limited Liability Partnership

Domestic For-Profit Limited Liability Company Foreign Limited Liability Partnership

Foreign For-Profit Limited Liability Company

Effective Date (Optional) (The conversion is effective upon the filing of this certificate or on a later date specified in the certificate)

Name and address of the person or entity that will provide a copy of the declaration of conversion upon written request.

Name

Mailing Address

City State Zip Code

Required information that must accompany conversion certificate if box 2 is checked

If the converting entity is a domestic or foreign entity that will not be licensed in Ohio, provide the name and address of the statutory agent upon whom any process, notice or demand may be served.

Name of Statutory Agent

Mailing Address

City State Zip Code

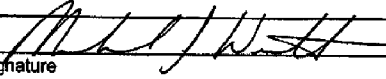
See instructions for additional filing requirements if

(1) the conversion creates a new domestic entity,
 (2) the converted entity is a foreign entity that desires to transact business in Ohio; or
 (3) if a domestic corporation or foreign corporation licensed in Ohio is the converting entity.

IN WITNESS WHEREOF, the conversion is authorized on behalf of the converting entity and that each person signing the certificate of conversion is authorized to do so.

Required

Must be signed by an authorized representative.


Signature

Chief Financial Officer, Secretary and Treasurer
By (if applicable)

Michael J. Wirth
Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities.

Belcan Corporation

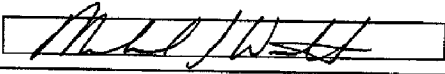
Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	09/23/2015	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319 Overnight: P.O. Box 182413 Columbus, OH 43218-2413	09/23/2015
*Only required for domestic for-profit corporations			
Ohio Department of Taxation Taxpayer Services Division/Tax Release Unit PO Box 182382 Columbus, OH 43218-2382 Dissolution@tax.state.oh.us *Complete this date notified field only if the corporation is a domestic non-profit corporation or foreign corporation. [see* note below]		<input checked="" type="checkbox"/> The corporation is not required to pay or the department of taxation has not assessed any personal property tax.	

*Note: Domestic for-profit corporations must submit with this filing a Certificate of Tax Clearance issued by the Ohio Department of Taxation.

Note: This affidavit must be signed by one or more persons executing the certificate or by an officer of the corporation.

Signature  Title CFO, Secretary and Treasurer

Michael J. Wirth
Name

10200 Anderson Way
Mailing Address

Cincinnati City OH State 45242 Zip Code

Sworn to and subscribed in my presence on 9/23/2015 Date



SUSAN ANN HOFFMAN
Notary Public, State of Ohio
Clermont County
My Commission Expires December 16, 2016

Commission Expires 12/16/2016 Date

AFFIDAVIT OF PERSONAL PROPERTY

State of Ohio

County of Hamilton Clermont

Michael J. Wirth
Name of Officer

Chief Financial Officer, Secretary and Treasurer of Belcan Corporation
Title of Officer Name of Corporation

and that this affidavit is made in compliance with Section 1701.86(H)(1) of the Ohio Revised Code.

That above-named corporation: (Check one (1) of the following)

- Has no personal property in any county in Ohio
- Is the type required to pay personal property taxes to state authorities only
- Has personal property in the following county (ies)

Hamilton

Signature: [Signature] Title: CFO, Secretary and Treasurer

Sworn to and subscribed in my presence on Date 9/23/2015



SUSAN ANN HOFFMAN
Notary Public, State of Ohio
Clermont County
My Commission Expires
December 16, 2016

[Signature]
Notary Public

Expiration date of Notary Public's Commission Date 12/16/2016



Taxpayer Services Division
P.O. Box 182382
Columbus, Ohio 43218-2382
Phone: 888-405-4039
TTY/TDD: 800-750-0750
<http://tax.ohio.gov>

Date: September 1, 2015

MICHAEL J WIRTH
BELCAN CORPORATION
10200 ANDERSON WAY
CINCINNATI, OH 45242
USA

Re: Certificate of Tax Clearance

This certificate certifies that the below stated entity has filed all tax returns and paid in full all taxes and fees administered by the tax commissioner through the certificate issue date.

This certificate does not preclude the Department from issuing a bill and/or assessment against the entity for any tax returns and tax liabilities that become due after the certificate issue date or as a result of an examination or audit for any period ending prior to the date of dissolution with the Ohio Secretary of State.

This Certificate of Tax Clearance is valid for 30 days from the date of issuance as indicated below.

BELCAN CORPORATION
Charter: 788860

Certificate issue date: September 1, 2015

A handwritten signature in black ink, appearing to read "Joseph W. Testa".

Joseph W. Testa
Tax Commissioner

Note: This certificate must be filed along with all forms prescribed by the Ohio Secretary of State. For filing information, visit Ohio Secretary of State's web site at OhioSecretaryofState.gov.



Form 533A Prescribed by:
Ohio Secretary of State
JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 670
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Articles of Organization for a Domestic Limited Liability Company

Filing Fee: \$125

CHECK ONLY ONE (1) BOX

(1) Articles of Organization for Domestic
For-Profit Limited Liability Company
(115-LCA)

(2) Articles of Organization for Domestic
Nonprofit Limited Liability Company
(115-LCA)

Name of Limited Liability Company

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd.," or "ltd"

Effective Date
(Optional) mm/dd/yyyy

(The legal existence of the limited liability company begins upon the filing
of the articles or on a later date specified that is not more than ninety days
after filing)

This limited liability company shall exist for
(Optional) Period of Existence

Purpose (Optional)

****Note for Nonprofit LLCs**

The Secretary of State does not grant tax exempt status. Filing with our office is not sufficient to obtain state or federal tax exemptions. Contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit limited liability company secures the proper state and federal tax exemptions. These agencies may require that a purpose clause be provided.

2015 SEP 24 PM 3:50
RECEIVED

ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member(s), manager(s) or representative(s) of

Belcan, LLC

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

C T Corporation System

Name of Agent

1300 East 9th Street

Mailing Address

Cleveland

City

Ohio

State

44114

ZIP Code

ACCEPTANCE OF APPOINTMENT

The undersigned, CT CORPORATION SYSTEM named herein as the statutory agent
Statutory Agent Name

for Belcan, LLC
Name of Limited Liability Company

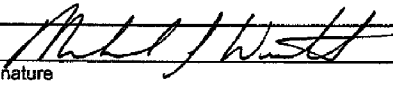
hereby acknowledges and accepts the appointment of agent for said limited liability company

Statutory Agent Signature J H Tanks III **James H. Tanks III**
Individual Agent's Signature / Signature on Behalf of Business Serving as Agent
Assistant Secretary

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Articles and original appointment of agent must be signed by a member, manager or other representative.


Signature

By (if applicable)

Michael J. Wirth

Print Name

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name