

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM439465

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
ioSemantics LLC		11/30/2015	Limited Liability Company: COLORADO
RECEIVING PARTY DATA			
Name:	Phase Change Software LLC		
Street Address:	651 Corporate Circle, Suite 209		
City:	Golden		
State/Country:	COLORADO		
Postal Code:	80401		
Entity Type:	Limited Liability Company: COLORADO		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Serial Number:	86815540	PHASE CHANGE	
Registration Number:	3459411	IOSEMANTICS	
CORRESPONDENCE DATA			
Fax Number:	3038630223		
<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:	3038639700		
Email:	cbryce@sheridanross.com		
Correspondent Name:	Caroline E. Bryce		
Address Line 1:	1560 Broadway, Suite 1200		
Address Line 2:	Sheridan Ross P.C.		
Address Line 4:	Denver, COLORADO 80202		
ATTORNEY DOCKET NUMBER:	5565TM-1		
NAME OF SUBMITTER:	Caroline E. Bryce		
SIGNATURE:	/Caroline E. Bryce/		
DATE SIGNED:	08/16/2017		
Total Attachments: 2			
source=ioSemantics LLC name change#page1.tif			
source=ioSemantics LLC name change#page2.tif			

CH \$65.00 86815540



Colorado Secretary of State
 Date and Time: 11/30/2015 02:50 PM
 ID Number: 20051092473
 Document number: 20151768250
 Amount Paid: \$25.00

Document must be filed electronically.
 Paper documents are not accepted.
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 For more information or to print copies
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Articles of Amendment

filed pursuant to §7-90-301, et seq. and §7-80-209 of the Colorado Revised Statutes (C.R.S.)

ID number: 20051092473

1. Entity name: ioSemantics LLC
 (If changing the name of the limited liability company, indicate name before the name change)

2. New Entity name: Phase Change Software LLC
 (if applicable)

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, mark the applicable box):

"bank" or "trust" or any derivative thereof
 "credit union" "savings and loan"
 "insurance", "casualty", "mutual", or "surety"

4. Other amendments, if any, are attached.

5. If the limited liability company's period of duration as amended is less than perpetual, state the date on which the period of duration expires:

(mm/dd/yyyy)

or

If the limited liability company's period of duration as amended is perpetual, mark this box:

6. (Optional) Delayed effective date: _____

(mm/dd/yyyy)

Notice:

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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.

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

Greber David Scott _____

(Last) (First) (Middle) (Suffix)

75-E Thomas Johnson Drive

(Street name and number or Post Office Box information)

Frederick

(City)

MD

(State)

21702

(Postal/Zip Code)

United States

(Province – if applicable)

(Country – if not US)

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