CH \$515.00 4618631

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM463344

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Marshfield Clinic		02/28/2014	Corporation: WISCONSIN

RECEIVING PARTY DATA

Name:	Marshfield Clinic, Inc.
Street Address:	1000 North Oak Avenue
City:	Marshfield
State/Country:	WISCONSIN
Postal Code:	54494
Entity Type:	Non-Stock Corporation: WISCONSIN

PROPERTY NUMBERS Total: 20

Property Type	Number	Word Mark
Registration Number:	4618631	CARE MY WAY
Registration Number:	4439497	
Registration Number:	4456778	HEART HEALTH MOBILE
Registration Number:	4435251	
Registration Number:	3190292	LAIRD CENTER FOR MEDICAL RESEARCH
Registration Number:	3374571	WESTON REGIONAL MEDICAL CENTER
Registration Number:	2810661	RECIN
Registration Number:	3902984	MARSHFIELD CLINIC DON'T JUST LIVE. SHINE
Registration Number:	3830177	MARSHFIELD LABS
Registration Number:	4031856	CATTAILS
Registration Number:	2379605	HARVESTING HEALTH
Registration Number:	2413635	MARSHFIELD CLINIC
Registration Number:	2144424	MARSHFIELD CLINIC
Registration Number:	2152112	MARSHFIELD CLINIC
Registration Number:	2140610	MARSHFIELD CLINIC
Registration Number:	2132529	
Registration Number:	2180045	MARSHFIELD LABORATORIES
Registration Number:	2181888	NATIONAL FARM MEDICINE CENTER
Registration Number:	2181887	NATIONAL FARM MEDICINE CENTER

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Property Type	Number	Word Mark
Registration Number:	2180032	

CORRESPONDENCE DATA

Fax Number: 6082587138

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.

Phone: 608-255-4440

Email: PTO-WIS@huschblackwell.com, julie.hughes@huschblackwell.com

Correspondent Name: Husch Blackwell LLP

Address Line 1: PO Box 1379
Address Line 2: Melinda S. Giftos

Address Line 4: Madison, WISCONSIN 53701

NAME OF SUBMITTER:	Melinda S. Giftos
SIGNATURE:	/Melinda S. Giftos/
DATE SIGNED:	02/26/2018

Total Attachments: 3

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FEB 25 2014

Cor	179.76(3)	& (5)	

180.1161(3) & (5), Wisconsin Dept of State of Wisconsin

181.1161(3) & (5) and mancis HEPARIMENT OF FINANCIAL INSTITUTIONS
183.1207(3) & (5).

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Wis. Stars.

Division of Corporate & Consumer Services



	CERTIFICATE OF CONVERSION	STATE OF WISCONSIN FILED
1. Before con	version:	FE B 2 6 2014
Company Name:		DEPARTMENT OF
Marshfield C	inlo	PRANCIAL INSTITUTIONS
Indicate (X) Entity Type	☐ Limited Partnership (Ch. 179, Wis. Stats.) ☐ Business Corporation (Ch. 180, Wis. Stats.) ☐ Nonstock Corporation (Ch. 181, Wis. Stats.) ☐ Limited Liability Company (Ch. 183, Wis. Stats.)	Organized under the laws of Wisconsin (state or country *)
2. Does the co	nverting entity have a fee simple ownership interest in any Wisconsin	rsai scrate?
∑ Yes	□ No •	
Revenue under NOTE: Sec. 7	—If you answer yea, the entity is required to file a report with the Wisec. 73.14 of the Wis. Stats, within 60 days after the effective date of 3.14(2)(a) provides a penalty of \$200 for each day that the report is lat a the form at: http://ww2.revenue.wi.gov/internet/merger.html	the conversion.
State or other a	out-of-state) business entity is converting to a wisconstitutions which converting to a wisconstitution of existence" or "certificate of good standing") is ppropriate official in the jurisdiction where the foreign business entity business entity business entity and its date of incorporation or formation.	med by the Secretary of
3. After conve	rsion:	
Company Nam	e;	300000000
Marshfield Cli	nic, Inc.	
Indicate (X) Entity Type	☐ Limited Partnership (Ch. 179, Wis. Stats.) ☐ Business Corporation (Ch. 180, Wis. Stats.)	Organized under the laws of
	Nonstock Corporation (Ch. 181, Wis. Stats.)	Wisconsin
ere interest	Limited Liability Company (Ch. 183, Wis. Stats.)	(state or country)

FILING FEE - \$150.00 Use of this form is mandatory.

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- 4. A Plan of Conversion containing all the following parts is attached as Exhibit A. (NOTE: A template for Plan of Conversion is included in this form. Use of the template is optional.)
 - A. The name, form of business entity, and identity of the jurisdiction governing the business entity that is to be converted.
 - B. The name, form of business entity, and identity of the jurisdiction that will govern the business entity after conversion.
 - C. The terms and conditions of the conversion.
 - D. The manner and basis of converting the shares or other ownership interests of the business entity that is being converted into shares or other ownership interests of the new form of business entity.
 - E. The effective date and time of conversion, if the conversion is to be effective other than at the time of filing the certificate of conversion as provided under sec. 179.11(2), 180.0123, 181.0123 or 183.0111, whichever governs the business entity prior to conversion.
 - F. A copy of the articles of incorporation, articles of organization, certificate of limited partnership, or other similar governing document of the business entity after conversion as Exhibit B. (NOTE: Templates for certificate of limited partnership, articles of incorporation, and articles of organization are included in this form. Use of the templates is optional.)
 - G. Other provisions relating to the conversion, as determined by the business entity.
- 5. The Plan of Conversion was approved in accordance with the applicable law-of-the jurisdiction-that governs the organization of the business entity.
- 6. Registered Agent (Agent for Service of Process) and Registered Office (Agent's business office) of the business entity PRIOR TO CONVERSION:

Registered Agent (Agent for Service of Process):	Registered Office: 1000 No. Oak Avenue
Brian H. Ewert, M.D.	Marshfield, WI 54449
Additional Entry for a Limited Partnership	Record Office:
only →	
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7. Registered Agent (Agent for Service of Process) and Registered Office (Agent's business office) of the business entity AFTER CONVERSION:

Registered Agent (Agent for Service of Process):	Registered Office in WI (Street & Number, City, State (WI) and ZIP code): 1000 No. Oak Avenue
Barbara A. Kuhl	Marshfield, WI 54449
Additional Entry for a Limited Partnership only	Record Office:

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8. Executed on 02/25/2014 (date) business entity PRIOR TO ITS CONVERS	by the Bing End no	
figures county I treate I be a second	(Signature)	
Mark (X) below the title of the person exec	ating the	
document.	Brian H: Ewert, M.D.	
For a limited partnership	(Printed Name) STATE OF WIST	TON
Title: General Partner	For a corporation	*****
For a limited liability company	Title: President OR Secretary FEB 2 6	20
Title: Member OR Manager	or other officer title	
(5), Wis. Stats. for document content) Submit one original and one exact copy listed below. Make checks payable to the	(5), 180.1161(3) & (5), 181.1161(3) & (5) and 183.1207(3) & along with the required filing fee of \$130.00 to the address of Department of Financial Institutions. Filing fee is non-	
(16), 181.0103 (23) or 183.0107 (1g)(c), V	Vis. Stats.	
Division of Corporate & Consumer	hysical Address for Express Mail: spartment of Financial Institutions ivision of Corporate & Consumer Services Phone: 608-261-7577 FAX: 608-267-6813 TTV: 608-266-8818	

NOTICE: This form may be used to accomplish a filing required or permitted by statute to be made with the department. Information requested may be used for secondary purposes. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

Madison WI 53703

201 W. Washington Ave Suite 300

1. Enter the company name, type of business entity, and state of organization of business entity **prior to** conversion. Definitions of foreign entity types are set forth in ss. 179.01(4), 180.0103(9), 181.0103(13) and 183.0102(8), Wis. Stats.

If a foreign (out-of-state) business entity is converting to a Wisconsin business entity, attach a certificate of status (variously called "certificate of existence" or "certificate of good standing") issued by the Secretary of State or other appropriate official in the jurisdiction where the foreign husiness entity is organized, to include the name of the business entity and its date of incorporation or formation.

- 2. Select yes or no to indicate whether the converting entity has a fee simple ownership interest in any Wisconsin real estate. See sec. 73.14 and 77.25, Wis. Stats., or contact the Wisconsin Department of Revenue at (608)266-1594 for questions regarding fee simple ownership interest and the filing requirements with that department.
- 3. Enter the company name, type of business entity, and state of organization of husiness entity after conversion.

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PO Box 7846

Madison WI 53707-7846

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RECORDED: 02/26/2018