

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM482343

<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>
Cascade Microtech, Inc.		05/14/2018	Corporation: OREGON
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	FormFactor Beaverton, Inc.		
<b>Street Address:</b>	9100 SW Gemini Drive		
<b>City:</b>	Beaverton		
<b>State/Country:</b>	OREGON		
<b>Postal Code:</b>	97008		
<b>Entity Type:</b>	Corporation: OREGON		
<b>PROPERTY NUMBERS Total: 16</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	2509489	CASCADE MICROTECH	
<b>Registration Number:</b>	3963583		
<b>Registration Number:</b>	2517023	ATTOGUARD	
<b>Registration Number:</b>	1889191	EZ-PROBE	
<b>Registration Number:</b>	2580239	EYE-PASS	
<b>Registration Number:</b>	2002419	FEMTOGUARD	
<b>Registration Number:</b>	2773685	INFINITY PROBE	
<b>Registration Number:</b>	1891995	MICROCHAMBER	
<b>Registration Number:</b>	2534540	MICROSCRUB	
<b>Registration Number:</b>	2387417	PYRAMID PROBE	
<b>Registration Number:</b>	5362231	MEASUREONE	
<b>Registration Number:</b>	4849165	T-WAVE	
<b>Registration Number:</b>	4890246	SOURCEONE	
<b>Registration Number:</b>	3849294	MEMUNITY	
<b>Registration Number:</b>	5102901	Z  PROBE	
<b>Serial Number:</b>	87088019	CONTACT INTELLIGENCE	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	5032247329		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent</i>			
<b>TRADEMARK</b>			

CH \$415.00 2509489

*using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.*

**Phone:** 5032247529  
**Email:** david@dascenzoiplaw.com  
**Correspondent Name:** DASCENZO Intellectual Property Law, P.C.  
**Address Line 1:** 1000 SW Broadway, Suite 1555  
**Address Line 4:** Portland, OREGON 97205

<b>NAME OF SUBMITTER:</b>	Shelly Monteith
<b>SIGNATURE:</b>	/Shelly Monteith/
<b>DATE SIGNED:</b>	07/18/2018

**Total Attachments: 1**  
source=Articles of Amendment - Name Change 5-14-18#page1.tif



Articles of Amendment - Business/Professional Corporation

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200

REGISTRY NUMBER: 175009-19

FILED
MAY 14 2018



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.

OREGON SECRETARY OF STATE For office use only

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

- 1. ENTITY NAME: CASCADE MICROTECH, INC.
2. THE FOLLOWING AMENDMENT(S) TO THE ARTICLES OF INCORPORATION IS MADE HEREBY: State the article number(s) and set forth the article(s) as it is amended to read. (Attach a separate sheet if necessary.)

Article 1 Name of the corporation is FORMFACTOR BEAVERTON, INC.

- 3. THE AMENDMENT WAS ADOPTED ON: 05/14/2018 (if more than one amendment was adopted, identify the date of adoption of each amendment.)

4. PLEASE CHECK THE APPROPRIATE STATEMENT:

Shareholder action was required to adopt the amendment(s). The vote was as follows:

Table with 5 columns: Class or series of shares, Number of shares outstanding, Number of votes entitled to be cast, Number of votes cast FOR, Number of votes cast AGAINST. Row 1: Common, 100, 100, 100, 0

- Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.
The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

5. Principal Place of Business (Physical Street Address)

9100 SW GEMINI DR
BEAVERTON, OR 97225

6. INDIVIDUAL WITH DIRECT KNOWLEDGE (Name and Address) List the name and address of at least one individual who is a director, or controlling shareholder of the corporation or an authorized representative with direct knowledge of the operations and business activities of the corporation.

JASON COHEN
C/O FORMFACTOR
7005 SOUTHFRONT ROAD, LIVERMORE, CA 94551

7. EXECUTION:

I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation. 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: [Handwritten Signature]

Printed Name: JASON COHEN

Title: SECRETARY

CONTACT NAME: (To resolve questions with this filing)

GALE SMITH-CAMP

PHONE NUMBER: (Include area code)

855-855-1350

Articles of Amendment - Business/Professional Corporation (11/17)

FEES

Required Processing Fee \$100

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

Free copies are a program.

FORMFACTOR BEAVERTON, INC.



REEL: 006383 FRAME: 0573

RECORDED: 07/18/2018