

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM528274

<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>
Ducktrap River of Maine, LLC		04/18/2019	Limited Liability Company: MAINE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Mowi Ducktrap, LLC		
<b>Street Address:</b>	57 Little River Drive		
<b>City:</b>	Belfast		
<b>State/Country:</b>	MAINE		
<b>Postal Code:</b>	04915		
<b>Entity Type:</b>	Limited Liability Company: MAINE		
<b>PROPERTY NUMBERS Total: 7</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	1584925	DUCKTRAP RIVER	
<b>Registration Number:</b>	1584926	KENDALL BROOK	
<b>Registration Number:</b>	2314753	WINTER HARBOR	
<b>Registration Number:</b>	2357203	DUCKTRAP RIVER FISH FARM	
<b>Registration Number:</b>	4447514	SPRUCE POINT	
<b>Registration Number:</b>	4447518	DUCKTRAP	
<b>Registration Number:</b>	4623267	DUCKTRAP RIVER OF MAINE	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	2077911350		
<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>Phone:</b>	207-791-1100		
<b>Email:</b>	trademark@pierceatwood.com		
<b>Correspondent Name:</b>	William L. Worden, Esq/Pierce Atwood LLP		
<b>Address Line 1:</b>	254 Commercial Street		
<b>Address Line 4:</b>	Portland, MAINE 04101		
<b>ATTORNEY DOCKET NUMBER:</b>	18467/8647		
<b>NAME OF SUBMITTER:</b>	William L. Worden, Esq.		
<b>SIGNATURE:</b>	/William L. Worden/		

CH \$190.00 1584925

<b>DATE SIGNED:</b>	06/18/2019
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**Total Attachments: 4**

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# State of Maine



## Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and that the paper to which this is attached is a true copy from the records of this Department.

*In testimony whereof*, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this twenty-fourth day of April 2019.



A handwritten signature in black ink, appearing to read "Matthew Dunlap", written over a horizontal line.

Matthew Dunlap  
Secretary of State

LIMITED LIABILITY COMPANY  
STATE OF MAINE  
CERTIFICATE OF AMENDMENT  
(for a Maine LLC)

Ducktrap River of Maine, LLC  
(Name of Limited Liability Company)

File No. 19980307DC Pages 3  
Fee Paid \$ 50  
DCN 2191122230016 LNME  
FILED  
04/19/2019

  
Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §1522, the undersigned limited liability company executes and delivers for filing this certificate of amendment:

**FIRST:** The name of the limited liability company has been changed to (if no change, so indicate)

Mowb Ducktrap, LLC

(A limited liability company name must contain the words "limited liability company" or "limited company" or the abbreviation "L.L.C.," "LLC," "L.C." or "LC" or, in the case of a low-profit limited liability company, "L.P.C." or "LPC." - see 31 MRSA §308)

**SECOND:** The date of filing of the initial certificate of formation: January 12, 1998  
(date)

**THIRD:** Designation as a low profit LLC (Check only if applicable):

This is a low-profit limited liability company pursuant to 31 MRSA §16E1 meeting all qualifications set forth here:

- A. The company intends to qualify as a low-profit limited liability company;
- B. The company must at all times significantly further the accomplishment of one or more of the charitable or educational purposes within the meaning of Section 170(c)(2)(B) of the Internal Revenue Code of 1986, as it may be amended, revised or succeeded, and must list the specific charitable or educational purposes the company will further;
- C. No significant purpose of the company is the production of income or the appreciation of property. The fact that a person produces significant income or capital appreciation is not, in the absence of other factors, conclusive evidence of a significant purpose involving the production of income or the appreciation of property; and
- D. No purpose of the company is to accomplish one or more political or legislative purpose within the meaning of Section 170(e)(2)(D) of the Internal Revenue Code of 1986, or its successor.

Form No. MLLC-9 (1 of 3)

**FOURTH:** Designation as a professional limited liability company (Check only if applicable)

This is a professional limited liability company\* formed pursuant to 13 M.R.S.A. Chapter 23-A to provide the following professional services:

\_\_\_\_\_

\_\_\_\_\_ (type of professional services)

**FIFTH:** Complete only if there is a change to the registered agent information.

The Registered Agent is a: (select either a Commercial or Noncommercial Registered Agent)

Commercial Registered Agent CRA Public Number: \_\_\_\_\_

\_\_\_\_\_ (Name of commercial registered agent)

Noncommercial Registered Agent

\_\_\_\_\_ (Name of noncommercial registered agent)

\_\_\_\_\_ (physical location, not P.O. Box -- street, city, state and zip code)

\_\_\_\_\_ (mailing address if different from above)

**SIXTH:** Pursuant to 5 M.R.S.A. §§405.2 or 408.3, the registered agent listed above has consented to serve as the registered agent for this limited liability company.

**SEVENTH:** Other changes this certificate of amendment makes to the certificate of formation as most recently amended or restated are set forth in Exhibit \_\_\_\_ attached and made a part hereof.

\*\*Authorized person(s)

*[Handwritten Signature]*  
(Signature)

Dated April 19, 2019

Donald Cynewski, Authorized Person  
(Type or print name and capacity)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Type or print name and capacity)

\*Examples of professional service limited liability companies are accountants, attorneys, chiropractors, dentists, registered nurses and veterinarians. (This is not an inclusive list -- see 13 MRSA §723.7)

\*\*Pursuant to 31 MRSA §1076.1, this Certificate of Amendment MUST be signed by a person authorized by the limited liability company.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under 17-A MRSA §453.

Please remit your payment made payable to the Maine Secretary of State.

Submit completed form to: Secretary of State  
Division of Corporations, UCC and Commissions  
101 State House Station  
Augusta, ME 04333-0101  
Telephone Inquiries: (207) 624-7752      Email Inquiries: CEC.Corporations@Maine.gov

Form No. MLLC-9 (3 of 3) 7/6/2011