# OP \$115.00 2073633

### TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM574789

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

### **CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Lauren Manufacturing, LLC		10/01/2019	Limited Liability Company:

### **RECEIVING PARTY DATA**

Name:	Cooper-Standard Industrial and Specialty Group, LLC	
Street Address:	2228 Reiser Ave	
City:	New Philadelphia	
State/Country:	ОНЮ	
Postal Code:	44663	
Entity Type:	Limited Liability Company: OHIO	

### **PROPERTY NUMBERS Total: 4**

Property Type	Number	Word Mark	
Registration Number:	2073633	FLUOROLAST WB	
Registration Number:	5228262	FLUOROLAST	
Registration Number:	5227174	L LAUREN MANUFACTURING	
Registration Number:	4494545	L LAUREN MANUFACTURING	

### **CORRESPONDENCE DATA**

Fax Number:

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:** 2485966064

**Email:** denise.balog@cooperstandard.com

Correspondent Name: Denise Balog

Address Line 1: 40300 Traditions Drive

Address Line 4: Northville, MICHIGAN 48168

NAME OF SUBMITTER:	Denise Balog
SIGNATURE:	/Denise Balog/
DATE SIGNED:	05/05/2020

### **Total Attachments: 3**

source=Filed Cert. of Amendment - name change to Cooper-Standard Industrial and Specialty Group#page1.tif source=Filed Cert. of Amendment - name change to Cooper-Standard Industrial and Specialty Group#page2.tif source=Filed Cert. of Amendment - name change to Cooper-Standard Industrial and Specialty Group#page3.tif

TRADEMARK REEL: 006930 FRAME: 0416



DATE 07/23/2019 DOCUMENT ID 201920400712

DESCRIPTION LIMITED LIABILITY COMPANY - AMENDMENT (LAM)

FILING 50.00

**EXPED** 100.00 CERT 0.00 COPY 0.00

### Receipt

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

CT CORPORATION SYSTEM **SETH CROSE** 4400 EASTON COMMON WAY, STE. 125 COLUMBUS, OH 43219

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose 872139

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

COOPER-STANDARD INDUSTRIAL AND SPECIALTY GROUP, LLC

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

Document(s)

Document No(s):

LIMITED LIABILITY COMPANY - AMENDMENT

201920400712

Effective Date: 10/01/2019



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 23rd day of July, A.D. 2019.

Fort of Place **Ohio Secretary of State** 

> TRADEMARK REEL: 006930 FRAME: 0417



Toll Free: (877) SOS-FILE (877-767-3453)

Central Ohio: (614) 466-3910 www.OhioSecretaryofState.gov Busserv@OhioSecretaryofState.gov

File online or for more information: www.OHBusinessCentral.com

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

For screen readers, follow instructions located at this path

## Domestic Limited Liability Company Certificate of Amendment or Restatement

Filing Fee: \$50 Form Must Be Typed

(CHE	ЭK	ONLY	ONE	(1)	BOX	
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formore plant plant is marri	
(1) Domestic Limited Liability Company	(2) Domestic Limited Liability Company
	Restatement (142-LRA)
Date of Formation (MM/DD/YYYY)	Date of Formation (MM/DD/YYYY)
The undersigned authorized representative of:	
Lauren Manufacturing, LLC	
Name of Limited Liability Company	
872139	
Registration Number	
sections below must be completed.  The name of said limited liability company shall be:	
Cooper-Standard Industrial and Specialty Group, LLC	
Name must include one of the following words or abbrev "ltd." or "ltd"	riations: "limited liability company," "limited," "LLC," "L.L.C.,"
This limited liability company shall exist for a period of:	Period of Existence
Purpose	

Last Revised: 10/01/2017

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	of old an	
Must be signed by a member, manager or other representative.	Signature	
If authorized representative is an individual, then they must sign in the "signature"	By (if applicable)	
box and print their name in the "Print Name" box.	Joanna M. Totsky, Secretary  Print Name	
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	

Last Revised: 10/01/2017 **TRADEMARK REEL: 006930 FRAME: 0419**