

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM845188

<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>
Italgrani U.S.A., Inc.		07/19/2023	Corporation: MINNESOTA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Richardson USA Inc.		
<b>Street Address:</b>	530 Maryville Centre Drive		
<b>Internal Address:</b>	Suite 100		
<b>City:</b>	St Louis		
<b>State/Country:</b>	MISSOURI		
<b>Postal Code:</b>	63141		
<b>Entity Type:</b>	Corporation: MINNESOTA		
<b>PROPERTY NUMBERS Total: 7</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	1835599	MASSIMA	
<b>Registration Number:</b>	1827605	AURORA	
<b>Registration Number:</b>	5812766	I	
<b>Registration Number:</b>	5826526	ITALGRANI USA	
<b>Registration Number:</b>	1822076	AURORA STAR	
<b>Registration Number:</b>	1841970	BRAVA	
<b>Serial Number:</b>	97583801	ITALGRANI	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	2023712540		
<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>	202-371-2600		
<b>Email:</b>	tm@sternekessler.com		
<b>Correspondent Name:</b>	Monica Riva Talley		
<b>Address Line 1:</b>	1101 K Street, N.W.		
<b>Address Line 2:</b>	10th Floor		
<b>Address Line 4:</b>	Washington, D.C. 20005		
<b>NAME OF SUBMITTER:</b>	Dana N. Justus		
<b>SIGNATURE:</b>	/Dana N. Justus/		

OP \$190.00 1835599

<b>DATE SIGNED:</b>	10/11/2023
<b>Total Attachments: 2</b> source=Articles of Amendment re Name Change (ID 12835)#page1.tif source=Articles of Amendment re Name Change (ID 12835)#page2.tif	

# Office of the Minnesota Secretary of State

Minnesota Business & Nonprofit Corporations

## Amendment to Articles of Incorporation

Minnesota Statutes, Chapter 302A or 317A



Read the instructions before completing this form.

**Filing Fee: \$55 for expedited service in-person and online filings, \$35 for mail**

Note: Information provided when filing a business entity is public data and may be viewable online. This includes but is not limited to all individual names and addresses.

1. File Number: 3J-513

2. Corporate Name: (Required)

Italgrani U.S.A., Inc.

*List the name of the company prior to any desired name change*

3. This amendment is effective on the day it is filed with the Secretary of State, unless you indicate another date, no later than 30 days **after** filing with the Secretary of State.

Format: (mm/dd/yyyy)

4. The following amendment(s) to articles regulating the above corporation were adopted: (Insert full text of newly amended article(s) indicating which article(s) is (are) being amended or added.) If the full text of the amendment will not fit in the space provided, attach additional pages.

### ARTICLE 1

The name of the corporation is Richardson USA Inc.

5. This amendment has been approved pursuant to Minnesota Statutes, Chapter 302A or 317A.

6. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

[Signature]  
Signature of Authorized Person or Authorized Agent

07/19/23  
Date

#### Email Address for Official Notices

Enter an email address to which the Secretary of State can forward official notices required by law and other notices:

Michael.Jason@richardson.ca

Check here to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

List a name and daytime phone number of a person who can be contacted about this form:

Heather Clark 402.343.3767

Contact Name Phone Number

**Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the MN Dept. of Agriculture's Corporate Farm Program.**

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed?

Yes  No

TRADEMARK

REEL: 008223 FRAME: 0960



**Work Item 1408655100027**  
**Original File Number 3J-513**

STATE OF MINNESOTA  
OFFICE OF THE SECRETARY OF STATE  
FILED  
**09/13/2023 11:59 PM**

*Steve Simon*

Steve Simon  
Secretary of State