

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM861132

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
APS Technology, Inc.		12/05/2023	Corporation:
RECEIVING PARTY DATA			
Name:	APS Technology Holdings, Inc.		
Street Address:	7 Laser Lane		
City:	Wallingford		
State/Country:	CONNECTICUT		
Postal Code:	06492		
Entity Type:	Corporation: CONNECTICUT		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	3900006	RSM	
Registration Number:	4519931	APS TECHNOLOGY	
Registration Number:	2991025	ENGINEERING SOLUTIONS FOR HARSH ENVIRONM	
CORRESPONDENCE DATA			
Fax Number:			
<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>			
Phone:	13015750302		
Email:	jwachs@offitkurman.com		
Correspondent Name:	Jonathan R. Wachs		
Address Line 1:	Timonium Two, 1954 Greenspring Drive		
Address Line 2:	Suite 605		
Address Line 4:	Columbia, MARYLAND 21093		
ATTORNEY DOCKET NUMBER:	04840002.00001		
NAME OF SUBMITTER:	Jonathan R. Wachs		
SIGNATURE:	/Jonathan R. Wachs/		
DATE SIGNED:	12/14/2023		
Total Attachments: 2			
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**Secretary of the
State of Connecticut**

PHONE: 860-509-6003 • EMAIL: ord@ct.gov • WEB: www.concord-sots.ct.gov

OFFICE USE ONLY
(label)

**CERTIFICATE OF AMENDMENT
STOCK CORPORATION**

- Use ink. • Print or type.
- Attach additional 8 1/2 x 11 sheets if necessary

<p>FILING PARTY (confirmation will be sent to this address):</p> <p>NAME: APS Technology, Inc.</p> <p>ADDRESS: 7 Laser Lane</p> <p>CITY: Wallingford</p> <p>STATE: CT ZIP: 06492</p>	<p>FILING FEE: \$100.00</p> <p>Make checks payable to "Secretary of the State"</p>
<p>1. NAME OF CORPORATION (required) (must exactly match the name on record with our office, including the business designation, (e.g., Inc., Corp, Corporation, etc):</p> <p>APS TECHNOLOGY, INC.</p>	
<p>2. STATEMENT OF AMENDMENT (required) (check only one of the following statements, 2A, 2B, or 2C)</p>	
<p>THE CERTIFICATE OF INCORPORATION IS:</p> <p><input checked="" type="checkbox"/> 2A AMENDED ONLY. In section 3A below, provide the full text of any amendments to the corporation's certificate of incorporation, including any name changes.</p> <p><input type="checkbox"/> 2B AMENDED AND RESTATED. In section 3A below, provide the full text of each amendment <u>and</u> attach a complete restatement of the corporation's certificate of incorporation, incorporating the amendments.</p> <p><input type="checkbox"/> 2C RESTATED. Attach one document consolidating all previous amendments into the corporation's Certificate of Incorporation.</p>	
<p>3. CHECK THE BOX 3A, 3B ON THE NEXT PAGE OR BOTH AS APPLICABLE</p>	
<p><input checked="" type="checkbox"/> 3A. TEXT OF AMENDMENTS / SPECIFIC PUBLIC BENEFITS (if electing Benefit Corporation status in Section 3B on the next page, provide the text of the specific public benefits here, if any.)</p> <p>Paragraph First of the Certificate of Incorporation of the APS Technology, Inc. (the "Corporation"), setting forth the name of the Corporation, is hereby amended to change the name of the Corporation. To effect the foregoing, Paragraph First of the Certificate of Incorporation is amended to read in its entirety as follows: "FIRST: The name of the corporation is APS Technology Holdings, Inc."</p> <p><input type="checkbox"/> check box if additional pages are attached</p>	

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<input type="checkbox"/> 3B. STATEMENT ELECTING BENEFIT CORPORATION STATUS <i>(Must check box 3B to elect benefit corporation status)</i> The corporation elects to be a Benefit Corporation. In addition to the stated purposes for which the corporation is formed, the corporation shall also have the purpose to create a general public benefit as defined in the Connecticut Benefit Corporation Act. NOTE: If the Benefit Corporation adopts one or more specific public benefits <u>in addition to the required general public benefit</u> , check box 3A in addition to 3B, and set forth the specific public benefits in the space provided for in section 3A above.		
4. STATEMENT OF APPROVAL (required) (must check the box for only <u>one</u> statement, 4A, 4B, 4C or 4D) <input checked="" type="checkbox"/> 4A THE AMENDMENT WAS APPROVED BY SHAREHOLDERS IN THE MANNER REQUIRED BY SECTIONS 33-600 TO 33-998 OF THE CONNECTICUT GENERAL STATUTES, AND BY THE CERTIFICATE OF INCORPORATION. <input type="checkbox"/> 4B THE AMENDMENT WAS APPROVED BY THE INCORPORATORS. NO SHAREHOLDER APPROVAL WAS REQUIRED. <input type="checkbox"/> 4C THE AMENDMENT WAS APPROVED BY THE BOARD OF DIRECTORS. NO SHAREHOLDER APPROVAL WAS REQUIRED. <input type="checkbox"/> 4D THE AMENDMENT WAS APPROVED BY A MINIMUM STATUS VOTE, AS REQUIRED BY THE CONNECTICUT BENEFIT CORPORATION ACT. SELECT D IF A MINIMUM STATUS VOTE RESULTED IN THE ELECTION OF BENEFIT CORPORATION STATUS.		
5. EXECUTION/SIGNATURE (required) (subject to penalty of false statement) DATE (mm/dd/yyyy): <u>12</u> / <u>05</u> / 2023		
NAME OF SIGNATORY <i>(print or type)</i> Lawrence S. Weiner	CAPACITY/TITLE OF SIGNATORY <i>(print or type)</i> Executive Vice President	SIGNATURE 