

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

ETAS ID: TM873003

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT		
NATURE OF CONVEYANCE:	Corrective Assignment to correct the spelling of the word COMPANY in the name of the receiving party previously recorded on Reel 008311 Frame 0102. Assignor(s) hereby confirms the CHANGE OF NAME.		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Hardwood Products Company LP		11/23/2022	Limited Partnership: MAINE
RECEIVING PARTY DATA			
Name:	Puritan Medical Products Company I LP		
Street Address:	31 School Street		
City:	Guilford		
State/Country:	MAINE		
Postal Code:	04443		
Entity Type:	Limited Partnership: MAINE		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	0715160	CALGISWAB	
CORRESPONDENCE DATA			
Fax Number:	2028576395		
<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:	202-857-6000		
Email:	TMDocket@afslaw.com		
Correspondent Name:	Amy McFarland - ArentFox Schiff LLP		
Address Line 1:	1717 K Street, NW		
Address Line 4:	Washington, D.C. 20006		
ATTORNEY DOCKET NUMBER:	901904.00000		
NAME OF SUBMITTER:	Amy McFarland - ArentFox Schiff LLP		
SIGNATURE:	/Amy McFarland/		
DATE SIGNED:	02/01/2024		
Total Attachments: 9			
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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM866566

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Hardwood Products Company LP		11/23/2022	Limited Partnership: MAINE
RECEIVING PARTY DATA			
Name:	Puritan Medical Products Comany I LP		
Street Address:	31 School Street		
City:	Guilford		
State/Country:	MAINE		
Postal Code:	04443		
Entity Type:	Limited Partnership: MAINE		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	0715160	CALGISWAB	
CORRESPONDENCE DATA			
Fax Number:	2028576395		
<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:	202-857-6000		
Email:	TMDocket@afslaw.com		
Correspondent Name:	Amy McFarland - ArentFox Schiff LLP		
Address Line 1:	1717 K Street, NW		
Address Line 4:	Washington, D.C. 20006		
NAME OF SUBMITTER:	Amy McFarland		
SIGNATURE:	/Amy McFarland/		
DATE SIGNED:	01/08/2024		
Total Attachments: 7			
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OP \$40.00 0715160

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**DOMESTIC
LIMITED PARTNERSHIP**

STATE OF MAINE

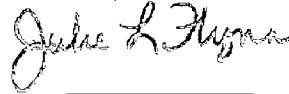
CERTIFICATE OF AMENDMENT

Hardwood Products Company LP
(Name of Limited Partnership)

Filing Fee \$50.00

File No. 19760052LP Pages 5
Fee Paid \$ 50
DCN 2223423610014 AMEN
FILED
12/08/2022

20.00)



Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §1322, the undersigned limited partnership executes and delivers for filing this certificate of amendment:

FIRST: The date of filing of the limited partnership's initial certificate is December 30, 1976
(date)

SECOND: The name of the limited partnership has been changed to (if no change, so indicate)

Puritan Medical Products Company I LP
(The name must contain one of the following: "Limited Partnership", "L.P." or "LP"; see 31 MRSA §1308.1.A.2)

THIRD: Check only one box, if applicable

The limited partnership is a limited liability limited partnership.
(If checked, the name in Item Second must contain one of the following: "Limited Liability Limited Partnership", "L.L.L.P." or "LLLP" and cannot contain the abbreviation of "L.P." or "LP"; see 31 MRSA §1308.1.A.3)

The limited partnership is **not** a limited liability limited partnership.
(If checked, the name in Item Second must contain one of the following: "Limited Partnership", "L.P." or "LP"; see 31 MRSA §1308.1.A.2)

FOURTH: Check only if applicable

This is a professional limited liability limited partnership** formed pursuant to 31 MRSA §1354.4 to provide the following professional services: (see 13 MRSA §723.7 for information on what constitutes professional services)

(type of professional services)

Form No. MLPA-9 (1 of 4)

FIFTH: The name, street and mailing address of each **new** general partner is (if no change, so indicate):

<u>Name</u>	<u>Address</u>
No change _____	_____
_____	_____
_____	_____

Names and addresses of additional new general partners are attached as Exhibit ____, and made a part hereof.

SIXTH: The name, street and mailing address of each **dissociated** person as a general partner is: (if no change, so indicate):

<u>Name</u>	<u>Address</u>
No change _____	_____
_____	_____
_____	_____

Names of additional dissociated person as a general partners are attached as Exhibit ____, and made a part hereof.

SEVENTH: The name, street and mailing address of the person as a general partner admitted under 31 MRSA §1391.3.B following the dissociation of the limited partnership's last general partner:

_____ (name)
_____ (physical location - street (not P.O. Box), city, state and zip code)
_____ (mailing address if different from above)

EIGHTH: The name, street and mailing address of the person appointed to wind up the limited partnership's activities under 31 MRSA §1393.3 or 4:

_____ (name)
_____ (physical location - street (not P.O. Box), city, state and zip code)
_____ (mailing address if different from above)

NINTH: (Check only if applicable)

The limited partnership is dissolved. (See 31 MRSA §1393.2.A)

Form No. MLPA-9 (2 of 4)

TENTH: If the street or mailing address of any current general partner has changed, the new address is (if no change, so indicate):

<u>Name of current general partner</u>	<u>New Address</u>
No change	

Names and new addresses of current general partners are attached as Exhibit ____, and made a part hereof.

ELEVENTH: If the name of any current general partner has changed, the new name is (if no change, so indicate):

<u>Name of current general partner</u>	<u>New name of current general partner</u>
No change	

Change of name of any current general partners are attached as Exhibit ____, and made a part hereof.

TWELFTH: Other amendments to the certificate for any other proper purpose as determined by the limited partnership are set forth in Exhibit A attached and made a part hereof.

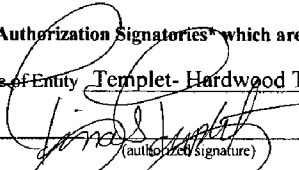
DATED 11/23/2022

Authorized Signatories*

(signature)	(type or print name)
(signature)	(type or print name)
(signature)	(type or print name)

For Authorization Signatories* which are Entities

Name of Entity Templet- Hardwood Trust

By  Timothy L. Templet, Trustee
(authorized signature) (type or print name and capacity)

Name of Entity Templet Family Limited Partnership

By  Timothy L. Templet, Trustee- General Partner
(authorized signature) (type or print name and capacity)

Name of Entity _____

By _____
(authorized signature) (type or print name and capacity)

***Certificate MUST be signed by:**

- For **Item Second** by at least one **general partner** listed in the certificate. (31 MRSA §1324.1.E.1)
- For **Item Third** by **ALL general partners** listed in the certificate. (31 MRSA §1324.1.B)
- For **Item Fourth** by at least one **general partner** listed in the certificate. (31 MRSA §1324.1.E.1)
- For **Item Fifth** by at least one **general partner** listed in the certificate and by each person designated as a new general partner. (31 MRSA §1324.1.E.1 and 2)
- For **Item Sixth** by at least one **general partner** listed in the certificate and by each person dissociated as a general partner. (31 MRSA §1324.1.E.1 and 3)
- For **Item Seventh** by the person designated as a **general partner** following the dissociation of the limited partnership's last general partner. (31 MRSA §1324.1.C)
- For **Item Eighth** by the person appointed to wind up the activities of the limited partnership. (31 MRSA §1324.1.D)
- For **Item Ninth** by **ALL general partners** listed in the certificate. (31 MRSA §1324.1.G)
- For **Item Tenth** by the general partner(s) affected by the change. (31 MRSA §1324.1.N)
- For **Item Eleventh** by the general partner(s) affected by the change. (31 MRSA §1324.1.N)
- For **Item Twelfth** by at least one **general partner** listed in the certificate. (31 MRSA §1324.1.J)

****In addition to the requirements of Item Third to designate the limited partnership as a limited liability limited partnership, the name must contain one of the following: "professional," "chartered," "professional association" or "service" or the abbreviation "P.A.," "PLLP," P.L.L.L.P., or "S.L.L.L.P.". Examples of professional services are accountants, attorneys, chiropractors, dentists, registered nurses and veterinarians. (This is not an inclusive list – see 13 MRSA §723.7.)**

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. MLPA-9 (4 of 4) Rev. 7/1/2007

Exhibit A

Certificate of Limited Partnership
to
Hardwood Products Company LP

Section 1 of Limited Partnership Agreement and Certificate is amended to read as follows:

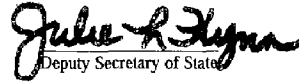
1. The name of the partnership is Puritan Medical Products Company 1 LP.

LIMITED PARTNERSHIP
STATE OF MAINE
PROOF OF AUTHORIZATION
ALLOWING USE OF SIMILAR NAME

Hardwood Products Company, LP
(Name of Limited Partnership Allowing Similar Name)

Filing Fee \$20.00

File No. 19760052LP Pages 2
Fee Paid \$ 20
DCN 2021511800048 RESD
FILED
05/31/2002


Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §403.2.A., the undersigned limited partnership executes and delivers for filing this proof of authorization for the use of a similar name:

The above-named limited partnership by such resolution hereby grants the use of the following similar name

Hardwood Products Company LLC

to Hardwood Products Company LLC

(requestor of similar name)

DATED 5/25
07/102

GENERAL PARTNER(S)*

(signature)

See attached

(type or print name)

For General Partner(s) which are Entities

Name of Entity _____

By _____

(authorized signature)

(type or print name and capacity)

*Certificate MUST be signed by at least one general partner.


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

SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101
FORM NO. MLPA-15 Rev. 4/16/2001 TEL. (207) 624-7740

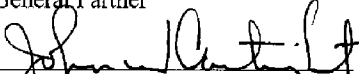
HARDWOOD PRODUCTS COMPANY, LP

HARDWOOD PRODUCTS COMPANY, LP, a Maine limited partnership, hereby authorizes the use of a similar name by the limited liability company, HARDWOOD PRODUCTS COMPANY LLC.


HARDWOOD PRODUCTS COMPANY, LP
By: Donald C. Templet Business Interest Trust
Its: General Partner

By: 
Timothy E. Templet, Trustee

By: Bettylee A. Cartwright Business Interest Trust
Its: General Partner

By: 
John W. Cartwright, Trustee

By: Joseph W. Cartwright Business Interest Trust
Its: General Partner

By: 
John W. Cartwright, Trustee

176574/EAH/SKLF
89331.8097