

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Conversion		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Shurflo Pump Manufacturing Co.		12/31/2003	CORPORATION: CALIFORNIA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Shurflo, LLC		
<b>Street Address:</b>	5900 Katella Ave.		
<b>City:</b>	Cypress		
<b>State/Country:</b>	CALIFORNIA		
<b>Postal Code:</b>	90630		
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: CALIFORNIA		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
Registration Number:	2762778	MASTER TAP	
<b>CORRESPONDENCE DATA</b>			
Fax Number:	(330)376-4577		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	330-376-2700		
Email:	tlink@ralaw.com		
Correspondent Name:	Terrence H. Link II		
Address Line 1:	222 S. Main St.		
Address Line 2:	Roetzel & Andress		
Address Line 4:	Akron, OHIO 44308		
ATTORNEY DOCKET NUMBER:	067920.1602		
NAME OF SUBMITTER:	Terrence H. Link II		
Signature:	/th/		
Date:	09/04/2009		

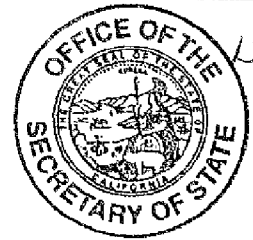
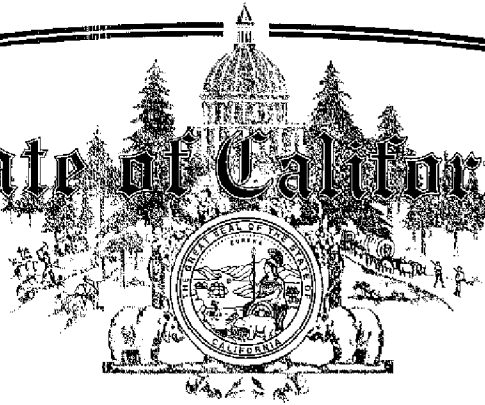
CH \$40.00 2762778

Total Attachments: 2

source=SHURFLO LLC - CONVERSTION DOCUMENTS#page1.tif

source=SHURFLO LLC - CONVERSTION DOCUMENTS#page2.tif

# State of California



## SECRETARY OF STATE

I, *Kevin Shelley*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.

**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of

JAN 17 2004



*Kevin Shelley*  
Secretary of State



State of California  
Kevin Shelley  
Secretary of State

00401210084  
File #

ENDORSED - FILED  
in the office of the Secretary of State  
of the State of California

DEC 31 2003

KEVIN SHELLEY  
Secretary of State

LIMITED LIABILITY COMPANY  
ARTICLES OF ORGANIZATION - CONVERSION

IMPORTANT — READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

This Space For Filing Use Only

1. NAME OF LIMITED LIABILITY COMPANY  
SHURflo, LLC

2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.

3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONLY ONE)

ONE MANAGER       MORE THAN ONE MANAGER       ALL LIMITED LIABILITY COMPANY MEMBER(S)

4. TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY (FOR INFORMATIONAL PURPOSES ONLY)  
Manufacturer of pumps and fluid handling equipment

5. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE      CITY AND STATE      ZIP CODE  
N/A

6. CHECK THE APPROPRIATE PROVISION BELOW AND NAME THE AGENT FOR SERVICE OF PROCESS

AN INDIVIDUAL RESIDING IN CALIFORNIA.  
 A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO CALIFORNIA CORPORATIONS CODE SECTION 1505.

AGENT'S NAME Norman A. Alexander

7. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA, IF AN INDIVIDUAL      CITY      STATE      ZIP CODE  
5900 Katella Avenue      Cypress      CA      90630

8. NAME OF CONVERTING ENTITY  
SHURflo Pump Manufacturing Co.

9. FORM OF ENTITY      10. JURISDICTION      11. CA SECRETARY OF STATE FILE NUMBER, IF ANY  
Corporation      California      C0602285

12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING:

NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE	PERCENTAGE VOTE REQUIRED
10 shares held by sole shareholder	2/3

13. NUMBER OF PAGES ATTACHED, IF ANY: 0 THE ATTACHED PAGES ARE INCORPORATED HEREIN BY THIS REFERENCE.

14. I DECLARE THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

SIGNATURE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON

J. Russell Phillips, President  
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

Norman A. Alexander, Vice President, CFO  
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

