

## TRADEMARK ASSIGNMENT

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Icon Systems, LLC		09/15/2008	LIMITED LIABILITY COMPANY: COLORADO
RECEIVING PARTY DATA			
Name:	Resurgent Health & Medical, LLC		
Street Address:	600 Corporate Circle, Suite H		
City:	Golden		
State/Country:	COLORADO		
Postal Code:	80401		
Entity Type:	LIMITED LIABILITY COMPANY: COLORADO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	1692698	CLEANTECH	
CORRESPONDENCE DATA			
Fax Number:	3038630223		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>			
Phone:	303-863-9700		
Email:	lhansen@sheridanross.com		
Correspondent Name:	Lew Hansen		
Address Line 1:	1560 Broadway, Suite 1200		
Address Line 4:	Denver, COLORADO 80202		
ATTORNEY DOCKET NUMBER:	5545-28		
NAME OF SUBMITTER:	Lew Hansen		
Signature:	/Lew Hansen/		

Date:

05/30/2012

Total Attachments: 2

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### Articles of Amendment

filed pursuant to §7-90-301, et seq. and §7-80-209 of the Colorado Revised Statutes (C.R.S.)

ID number: 20061197074

1. Entity name: Icon Systems, LLC  
*(If changing the name of the limited liability company, indicate name BEFORE the name change)*

2. New Entity name: Resurgent Health & Medical, LLC  
(if applicable)

3. Use of Restricted Words *(if any of these terms are contained in an entity name, true name of an entity, trade name or trademark stated in this document, mark the applicable box):*

<input type="checkbox"/>	"bank" or "trust" or any derivative thereof
<input type="checkbox"/>	"credit union" <input type="checkbox"/> "savings and loan"
<input type="checkbox"/>	"insurance", "casualty", "mutual", or "surety"

4. Other amendments, if any, are attached.

5. If the limited liability company's period of duration as amended is less than perpetual, state the date on which the period of duration expires:  
\_\_\_\_\_ (mm/dd/yyyy)

**OR**

If the limited liability company's period of duration as amended is perpetual, mark this box:

6. (Optional) Delayed effective date: \_\_\_\_\_ (mm/dd/yyyy)

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7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

Lentz	Kristin		
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>
1550 17th Street, Suite 500			
<i>(Street name and number or Post Office Box information)</i>			
Davis Graham & Stubbs LLP			
Denver	CO	80202	
<i>(City)</i>	<i>(State)</i>	<i>(Postal/Zip Code)</i>	
<i>(Province - if applicable)</i>	<i>(Country - if not US)</i>		

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