# OP \$40.00 88599902

### TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM582612

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

### **CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Pen Brands LLC		03/31/2020	Limited Liability Company:

### **RECEIVING PARTY DATA**

Name:	Nano Magic LLC
Street Address:	220 Eastview
Internal Address:	Suite 102
City:	Brooklyn Heights
State/Country:	OHIO
Postal Code:	44131
Entity Type:	Limited Liability Company: OHIO

### **PROPERTY NUMBERS Total: 1**

Property Type	Number	Word Mark
Serial Number:	88599902	NANO MAGIC

### **CORRESPONDENCE DATA**

Fax Number:

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.

**Phone:** 5174822400

Email: mmurshak@loomislaw.com

Correspondent Name: Loomis, Ewert, Parsley, Davis & Gotting,

Address Line 1: 124 W. Allegan Address Line 2: Suite 700

Address Line 4.

Address Line 4: Lansing, MICHIGAN 48933

NAME OF SUBMITTER:	Mikhail Murshak
SIGNATURE:	/Mikhail Murshak/
DATE SIGNED:	06/23/2020

### **Total Attachments: 3**

source=202009102966\_Nano Magic Corporate Name Change#page1.tif source=202009102966\_Nano Magic Corporate Name Change#page2.tif source=202009102966\_Nano Magic Corporate Name Change#page3.tif

TRADEMARK REEL: 006977 FRAME: 0102



DATE 04/01/2020

Document(s)

DOCUMENT ID 202009102966

LIMITED LIABILITY COMPANY - AMENDMENT (LAM)

50.00

COPY CERT 0.00 0.00

0.00

### Receipt

This is not a bill. Please do not remit payment.

TOM BERMAN 220 EASTVIEW DRIVE INDEPENDENCE, OH 44131

# STATE OF OHIO CERTIFICATE

## Ohio Secretary of State, Frank LaRose 908030

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

NANO MAGIC LLC

and, that said business records show the filing and recording of:

Document No(s):

LIMITED LIABILITY COMPANY - AMENDMENT Effective Date: 03/31/2020 202009102966



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 1st day of April, A.D. 2020.

**Ohio Secretary of State** 

The state of the s

**TRADEMARK** REEL: 006977 FRAME: 0103 Form 543A Prescribed by:



Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

(2) Domestic Limited Liability Company

# Domestic Limited Liability Company Certificate of Amendment or Restatement

Filing Fee: \$50
Form Must Be Typed

### (CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company

X Amendment (129-LAM)	Restatement (142-LRA)	
06/14/1995	MM/DD/YYYY	
Date of Formation (MM/DD/YYYY)	Date of Formation (MM/DD/YYYY)	
The undersigned authorized representative of:		
PEN BRANDS LLC		
Name of Limited Liability Company		
908030		
Registration Number		
If box (1) Amendment is checked, only complete section sections below must be completed.  The name of said limited liability company shall be:	ns that apply. If box (2) Restatement is checked, all	
Nano Magic LLC		
Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Itd." or "Itd"		
This limited liability company shall exist for a period of:	eriod of Existence	
Purpose		

TRADEMARKevised: 06/2019
REEL: 006977 FRAME: 0104

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.		
Required	/s/ Tom J. Berman	
Must be signed by a member, manager or other	Signature	
representative.	President and CEO	
If authorized representative is an individual, then they must sign in the "signature"	By (if applicable)	
box and print their name	Tom J. Berman	
in the "Print Name" box.	Print Name	
If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.	Signature  By (if applicable)	
	Print Name  Signature  By (if applicable)  Print Name	

TRADEMARK evised: 06/2019 Form 543A Page 2 of 2 **REEL: 006977 FRAME: 0105** 

**RECORDED: 06/23/2020**