TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM601224

SUBMISSION TYPE:	NEW ASSIGNMENT
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NATURE OF CONVEYANCE: **ENTITY CONVERSION**

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Blue Mountain Quality Resources, Inc.		08/27/2020	Corporation: PENNSYLVANIA

RECEIVING PARTY DATA

Name:	Blue Mountain Quality Resources, LLC
Street Address:	1963 Cato Avenue
City:	State College
State/Country:	PENNSYLVANIA
Postal Code:	16801
Entity Type:	Limited Liability Company: PENNSYLVANIA

PROPERTY NUMBERS Total: 6

Property Type	Number	Word Mark
Registration Number:	5871203	BLUE MOUNTAIN QUALITY RESOURCES
Registration Number:	3492054	BLUE MOUNTAIN REGULATORY ASSET MANAGER T
Registration Number:	3336612	BLUE MOUNTAIN REGULATORY ASSET MANAGER
Registration Number:	2503613	ECALIBRATION.COM
Registration Number:	2312306	BLUE MOUNTAIN QUALITY RESOURCES
Registration Number:	2273442	CALIBRATION MANAGER

CORRESPONDENCE DATA

Fax Number: 3032912400

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: 3032912300

Email: pctrademarks@perkinscoie.com

Correspondent Name: Sabrina J. Danielson, Perkins Coie LLP

Address Line 1: 1201 Third Avenue, Suite 4900 Address Line 4: Seattle, WASHINGTON 98101

ATTORNEY DOCKET NUMBER:	135284.10.1
NAME OF SUBMITTER:	Sabrina J. Danielson
SIGNATURE:	/Sabrina J. Danielson/
DATE SIGNED:	10/05/2020

Total Attachments: 6

source=Blue Mountain Quality Resources LLC - Stmt Conversion and Organization#page1.tif source=Blue Mountain Quality Resources LLC - Stmt Conversion and Organization#page2.tif source=Blue Mountain Quality Resources LLC - Stmt Conversion and Organization#page3.tif source=Blue Mountain Quality Resources LLC - Stmt Conversion and Organization#page4.tif source=Blue Mountain Quality Resources LLC - Stmt Conversion and Organization#page5.tif source=Blue Mountain Quality Resources LLC - Stmt Conversion and Organization#page6.tif

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

09/09/2020

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

Blue Mountain Quality Resources, LLC

I, Kathy Boockvar, Secretary of the Commonwealth of Pennsylvania, do hereby certify that the foregoing and annexed is a true and correct copy of

Creation Filing filed on Dec 28, 1990 - Pages (1) Amendment filed on Sep 29, 1997 - Pages (2) Amendment filed on Aug 27, 2020 - Pages (5)

which appear of record in this department.



IN TESTIMONY WHEREOF, I have hereunte set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC200909110966-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify

Entity#: 1632040 Date Filed: 08/27/2020 Pennsylvania Department of State

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	<u>-</u>	Statam	out of Commission
<u> CI - COUNTE</u>	<u>:K</u>		ent of Conversion DSCB:15-355
Name 13127581 %1			(7/1/2015)
Address nicole.grimme@woucrskiuwer.co			<u> </u>
City State	Zip Code	,1001110	TCO200827DD0780
Return document by email to:			
1.00.000	Read all instructions p	 prior	
Fee: \$70			
In compliance with the requireme conversion), the undersigned association			
A. For the converting association:			
1. The name of the converting assoc	ciation is: Blue Mount	ain Quality Resources,	Inc
2. The jurisdiction of formation of the	he converting associat	ion is: Pennsylvania	
3. The type of association is (check	only one):		
☑ Business Corporation☐ Nonprofit Corporation☐ Limited Liability Company	☐ Limited Partnersh☐ Limited Liability☐ Limited Liability	(General) Partnership	☐Business Trust ☐Professional Association ☐Other
4. Date on which the association wa	us created, incorporated	d, formed or otherwise c	ame into existence:
12/28/1990			
(MM/DD/YYYY)			
5. If the converting association is a corporation, limited partnership, lunder which it was first created, i	limited liability compa	ny, professional associa	tion or business trust), the statute

PA DEPT OF STATE

(ex. Business Corporation Law of 1988, Limited Liability Company Law of 1994, etc.)

Business Corporation Law of 1988

AUG 2 7 2020

6. Check and complete one of the following addresses for the converting association.

		a domestic filing association, domestic limit the current registered office address as on file voth:			
	(a) 1963 CATO Ave., State Colle	ege, PA 16801-0, Centre			
	Number and street	City St	ate	Zip	County
	(b) c/o:				
	Name of Commercial Register	ed Office Provider			County
		a domestic association that is <i>not</i> a domestic s, including street and number, if any, of its pri			or limited
	Number and street	City St	ate	Zip	County
Ц	Number and street	a registered or similar office, its principal offi	tate	Zip	
	For the converted association: 1. The name of the converted association.	ciation is: Blue Mountain Quality Resources,	LLC		
;	2. The jurisdiction of formation of	the converted association is: Pennsylvania			
•	3. The type of association is (check	k only one):			
	☐ Business Corporation☐ Nonprofit Corporation☑ Limited Liability Company	☐ Limited Partnership ☐ Limited Liability (General) Partnership ☐ Limited Liability Limited Partnership		usiness Trus rofessional A other	

4. Check and complete one of the following addresses for the converted association.

	If the converted association is a domestic filing association, domestic limited liability partnership or registered foreign association, its registered office address. Complete part (a) OR (b) - not both:				hip or	
\checkmark	(a) 1963 CATO Ave., State College,	PA 16801-0, Centre				
	Number and street	City	State	Zip	County	
	(b) c/o: Name of Commercial Registered C	Office Provider			County	
	If the converted association is a do liability partnership, the address, in				r limited	
	Number and street	City	State	Zip	County	
	If the converted association is a not (1) The address, including street and maintained by the law of its jurisdict office, its principal office address:	d number, if any, of its registered	or similar office,	if any, requi		
	Number and street	City	State	Zip		
	(2) The name and address, including street and number, of its registered agent:					
	Name of Registered Agent				namana na sikurana na na sikura	
	Number and street	City	State	Zip		
C.]	Effective date of statement of conver This Statement of Conversion shall This Statement of Conversion shall the statement of Conversion shall	II be effective upon filing in the I	Department of Stat	e following) te. it	:	
	This Statement of Conversion sha	Date (MM/	DD/YYYY)	Hour (if	any)	
D. .	Approval of conversion by convertin ✓ For converting association that is Pa.C.S. Chapter 3, Subchapter E (☐ For converting association that is ☐ of the jurisdiction of formation of	a domestic entity – The plan of correlating to conversion). a foreign association – The conve				
E. .	Attachments (see Instructions for requ	aired and optional attachments).				
	TESTIMONY WHEREOF, the unders ed by a duly authorized officer thereof		caused this Staten August	nent of Conv	version to be	
		Jane	Name of Converting Signature. Erickson, President	Association		
	Title					

TRADEMARK

REEL: 007070 FRAME: 0974

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return d Compent by mCOUNTE	R	Certificate of Organization Domestic Limited Liability Company DSCB:15-8821 (rev. 2/2017)		
Name 1317375516	3			
Address nicole.grimme@wolterskluwer	:.com			
City State	Zip Code			
Return document by email to:				
Read all instructions prior to completing	g. This form may be	submitted o	s.pa.gov/.	
Fee: \$125	eran/reservist-owned	d small business fee exempti	ion (see instructions)	
In compliance with the requirem undersigned desiring to organize a limite			of organization), the	
1. The name of the limited liability cor (designator is required, e.g., "company	npany is: Blue Moun ," "limited" or "limited"	tain Quality Resources, LLC ed liability company" or any ac	bbreviation thereof)	
2. Complete part (a) or (b) – not both:				
(a) The address of this limited liability (post office box alone is not accept		stered office in this Common	nwealth is:	
1963 CATO Ave., State College, PA 16	801-0, Centre			
Number and Street	City	State	Zip County	
(b) The name of this limited liabilities:	ty company's comm	ercial registered office prov	ider and county of venue	
c/o:				
Name of Commercial Registered Office Pro	vider	Co	ounty	
3. The name of each organizer is (all o	organizers must sign	on page 2):		
James R. Erickson				
4. Effective date of Certificate of Orga	anization (check and	l if appropriate complete. or	ne of the following):	
The Certificate of Organization s				
The Certificate of Organization s			at	
The Confidence of Organization's	man oo onconvo on	Date (MM/DD/YYYY)	Hour (if any)	

DSCB:15-8821-2

5.	Restricted professional companies only. Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).
	The company is a restricted professional company organized to render the following restricted professional service(s):
	 □ Chiropractic □ Dentistry □ Law □ Medicine and surgery □ Optometry □ Osteopathic medicine and surgery □ Podiatric medicine □ Public accounting □ Psychology □ Veterinary medicine
6.	Benefit companies only. Check the box immediately below if the limited liability company is organized as a benefit company:
	This limited liability company shall have the purpose of creating general public benefit.
	Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s). See instructions for examples of specific public benefit.
	☐ This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):
7.	For additional provisions of the certificate, if any, attach 8½ x 11 sheet(s).
IN	TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this
_	27th day of <u>August</u> 20 20
	Jans 12 Euro Ison
	Signature
	Signature
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TRADEMARK

REEL: 007070 FRAME: 0976