

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM790685

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Mega Fabrication, Inc.		02/09/2023	Corporation:
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Mega Fabrication, LLC		
<b>Street Address:</b>	1 N. Main		
<b>Internal Address:</b>	Suit 604		
<b>City:</b>	Hutchinson		
<b>State/Country:</b>	KANSAS		
<b>Postal Code:</b>	67501		
<b>Entity Type:</b>	Limited Liability Company: KANSAS		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	3438703	MEGAFAB	
<b>Registration Number:</b>	5236285	EASYROLL	
<b>Registration Number:</b>	5194657	EASYCROWN	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	4142974900		
<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>			
<b>Phone:</b>	4142712400		
<b>Email:</b>	ncampos@foley.com		
<b>Correspondent Name:</b>	Chris King		
<b>Address Line 1:</b>	777 E. Wisconsin Avenue		
<b>Address Line 4:</b>	Milwaukee, WISCONSIN 53202-5306		
<b>ATTORNEY DOCKET NUMBER:</b>	128226-0115		
<b>NAME OF SUBMITTER:</b>	Christopher M. King		
<b>SIGNATURE:</b>	/Christopher M. King/		
<b>DATE SIGNED:</b>	03/01/2023		
<b>Total Attachments: 2</b>			
source=MEGA FABRICATION, LLC - KS - Certified Copy of All Charter Documents 2-16-2023#page1.tif			

OP \$90.00 3438703




**KANSAS SECRETARY OF STATE**  
**Certificate of Conversion to a Kansas Entity**

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**Kansas Office of the Secretary of State:**  
 Memorial Hall, 1st Floor (785) 296-4564  
 120 S.W. 10th Avenue kssos@sos.ks.gov  
 Topeka, KS 66612-1594 www.sos.ks.gov

4167 01	FILED BY KS SOS
053 044	02-15-2023
\$240.00	4 04:19:13 PM
	FILE#: 3898590

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This form must be complete and accompanied by the correct filing fee or the document will not be accepted for filing.

**Converting Entity**

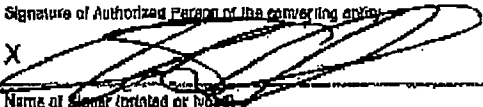
1. Business entity ID number <small>Not Federal Employer ID Number (FEIN):</small>	3898590
2. Entity name	Mega Fabrication, Inc.
3. Type of entity	<input checked="" type="checkbox"/> For-Profit Corporation <input type="checkbox"/> Not-for-Profit Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership
4. State or Country of organization	Kansas

**New Entity**

5. Entity name	Mega Fabrication, LLC						
6. Type of entity	<input type="checkbox"/> For-Profit Corporation <input type="checkbox"/> Not-for-Profit Corporation <input type="checkbox"/> General Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership						
7. Effective date <small>If future date is chosen, must be within 90 days of filing.</small>	<input checked="" type="checkbox"/> Upon filing <input type="checkbox"/> Future effective date:						
	<table border="1"> <tr> <th>Month</th> <th>Day</th> <th>Year</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Month	Day	Year			
Month	Day	Year					

The formation document and fee for the converted entity are attached. This conversion is approved in accordance with K.S.A. 17-78-401 through 17-78-406 or by the laws of the appropriate foreign jurisdiction.

I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct, and that I have remitted the required fee.

Signature of Authorized Person of the converting entity X 	Month 2	Day 9	Year 2023
Name of Signer (printed or typed) John P. Claxton	Title Chief Financial Officer and Treasurer		

**LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION**

**The name of the Limited Liability Company:**

Mega Fabrication, LLC

File date: \_\_\_\_\_

File time: \_\_\_\_\_

Business Entity ID Number: \_\_\_\_\_

**Registered Office in Kansas:**

1 N. Main, Suite 604  
Hutchinson, Kansas 67501

**Name of the resident agent at the registered office:**

John P. Claxton

**Mailing address for official mail:**

1 N. Main, Suite 604  
Hutchinson, KS 67501

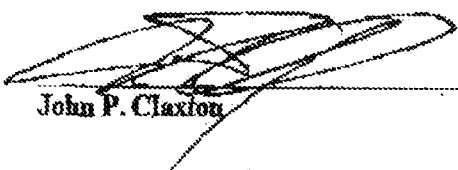
**Name of the organizer(s):**

John P. Claxton

I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

Execution date:

The signature of the organizer:

  
\_\_\_\_\_  
John P. Claxton

#1001014



I hereby certify this to be a true and correct copy of the original on file.  
Certified on this date: Feb 16, 2023  
SCOTT SCHWAB  
Secretary of State *Scott Schwab*

**TRADEMARK**