

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM797568

<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>
NANOFILM, LTD.		05/04/2017	Limited Liability Company: OHIO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	PEN BRANDS LLC		
<b>Street Address:</b>	10111 Sweet Valley Drive		
<b>City:</b>	Valley View		
<b>State/Country:</b>	OHIO		
<b>Postal Code:</b>	44125		
<b>Entity Type:</b>	Limited Liability Company: OHIO		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	2702651	ULTRA CLARITY	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<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>	5174822400		
<b>Email:</b>	mmurshak@loomislaw.com		
<b>Correspondent Name:</b>	Loomis, Ewert, Parsley, Davis & Gotting,		
<b>Address Line 1:</b>	124 WEST ALLEGAN		
<b>Address Line 2:</b>	SUITE 700		
<b>Address Line 4:</b>	LANSING, MICHIGAN 48933		
<b>NAME OF SUBMITTER:</b>	Mikhail Murshak		
<b>SIGNATURE:</b>	/Mikhail Murshak/		
<b>DATE SIGNED:</b>	03/26/2023		
<b>Total Attachments: 3</b>			
source=OH Name change to PB 5.2.17#page1.tif			
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OP \$40.00 2702651



DATE	DOCUMENT ID	DESCRIPTION	FILING	OVER PAYMENT	EXPED	CERT	COPY
05/04/2017	201712304878	LIMITED LIABILITY COMPANY - AMENDMENT (LAM)	50.00	0.00	0.00	0.00	0.00

**Receipt**

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

NSI  
MARINA REEL  
145 BAKER STREET  
MARION, OH 43302

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Jon Husted**

908030

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

**PEN BRANDS LLC**

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

Document(s)

**LIMITED LIABILITY COMPANY - AMENDMENT**

Effective Date: 05/02/2017

Document No(s):

**201712304878**



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  
4th day of May, A.D. 2017.

Ohio Secretary of State



Form 543A Prescribed by:  
**JON HUSTED**  
 OHIO SECRETARY OF STATE  
 Toll Free: (877) 906-FILE (877-767-3453)  
 Central Ohio: (614) 466-3910  
 www.OhioSecretaryofState.gov  
 busson@OhioSecretaryofState.gov  
 File online or for more information: www.OHBusinessCentral.com

Mail this form to one of the following:  
 Regular Filing (non expedite)  
 P.O. Box 1326  
 Columbus, OH 43216  
 Expedite Filing (Two business day processing time.  
 Requires an additional \$100.00)  
 P.O. Box 1390  
 Columbus, OH 43216

**Domestic Limited Liability Company Certificate of  
 Amendment or Restatement**  
**Filing Fee: \$50**

(CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company

Amendment (129-LAM)

Date of Formation

(2) Domestic Limited Liability Company

Restatement (142-LRA)

Date of Formation

The undersigned authorized representative of:

Name of limited liability company

Registration Number

If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

The name of said limited liability company shall be:

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd." or "ltd"

This limited liability company shall exist for a period of:   
Period of Existence

Purpose

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**

Must be signed by a member, manager or other representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

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.

PEN Inc.

Signature

*Scott E Rickert*

By (if applicable)

Scott E. Rickert, President

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name