# Office of the Minnesota Secretary of State

Assignment of Registration of Trademark, Service Mark,

Certification Mark or Collective Mark

Minnesota Statutes, Chapter 333



Read the instructions before completing this form.

# Filing Fee: \$35 for expedited service in-person and online filings, \$15 if submitted by mail

1. File Number:	2. Class:			
3. Mark as Described on Certifica	ite:			
4. Name of Present Registrant:				
Street Address	City	State	Zip	
	this mark and is assigning this regist ed to the mark for valid consideration		terest in this mark,	
Name				
Street Address	City	State	Zip	
Home Jurisdiction, if an organizat	ion:			
person(s) whose signature would be capacities. I further certify that I be correct and in compliance with the	I am signing this document as the person be required who has authorized me to s have completed all required fields, and e applicable chapter of Minnesota Statu as set forth in Section 609.48 as if I had	ign this document on his/her be that the information in this docu ites. I understand that by signin	half, or in both ument is true and ng this document I am	
Signature or Authorized Person or	Authorized Agent	Date		
Print Name	Titl	Title		
<b>Email Address for Official Notic</b> Enter an email address to which th	es a secretary of State can forward officiates and the secretary officiates and the	al notices required by law and c	other notices:	
Check here to have your email	l address excluded from requests for bu	alk data, to the extent allowed b	y Minnesota law.	
List a name and daytime phone	number of a person who can be cont	acted about this form:		

## **INSTRUCTIONS**

#### File your business document online by visiting our website at <u>www.sos.mn.gov</u>.

Retain the original signed copy of this document for your records and submit a legible photocopy for filing with the Office of the Secretary of State.

A separate assignment is required for each class.

1. Provide the file number issued by the Minnesota Secretay of State

2. Indicate the classification number under which this mark falls.

3. Provide the words, phrase and/or logo description as described on the Certificate of Registration for Trademark issued by this office.

4. List the name and address of the present applicant

5. List the name and address of the individual or organization that the mark has been assigned to. If this is an organization, list the home jurisdiction and the principal place of business in the home jurisdiction.

6. Must be signed by an authorized person or by an authorized agent on behalf of the present registrant (The signing party must indicate on the document that they are acting as the agent of the person(s) whose signature would be required and that they have been authorized to sign on behalf of that person(s).)

**Email Address for Official Notices.** This email address may be used to send annual renewal reminders and other important notices that may require action or response. Check the box if you wish to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

### List a name and daytime telephone number of a person who can be contacted about this form.

# Filing Fee: \$35 for expedited service in-person and online filings, \$15 if submitted by mail Payable to the MN Secretary of State

Please submit all items together and mail to the address below:

#### FILE IN-PERSON OR MAIL TO: Minnesota Secretary of State - Business Services First National Bank Building 332 Minnesota Street, Suite N201 Saint Paul, MN 55101 (Staffed 8 a.m. – 4 p.m., Monday - Friday, excluding holidays)

Phone Lines: (9 a.m. - 4 p.m., M-F) Metro Area 651-296-2803; Greater MN 1-877-551-6767

All of the information on this form is public. Minnesota law requires certain information to be provided for this type of filing. If that information is not included, your document may be returned unfiled. This document can be made available in alternative formats, such as large print, Braille or audio tape, by calling (651)296-2803/voice. For a TTY/TTD (deaf and hard of hearing) communication, contact the Minnesota Relay Service at 1-800-627-3529 and ask them to place a call to (651)296-2803. The Secretary of State's Office does not discriminate on the basis of race, creed, color, sex, sexual orientation, national origin, age, marital status, disability, religion, reliance on public assistance or political opinions or affiliations in employment or the provision of service.