## 900254970 05/10/2013

#### TRADEMARK ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

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

### **CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Manchester Pharmaceuticals, Inc.		05/05/2011	CORPORATION: CALIFORNIA

#### RECEIVING PARTY DATA

Name:	Manchester Pharmaceuticals LLC		
Street Address:	P.O. Box 4531		
City:	Mountain View		
State/Country:	CALIFORNIA		
Postal Code:	94040		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		

#### PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Serial Number:	77830559	CHENODAL

#### CORRESPONDENCE DATA

Fax Number: 6504930337

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US

Mail.

Phone: 650-493-9169

Email: jihirschpa@earthlink.net

Correspondent Name: Joseph I. Hirsch
Address Line 1: 4149 Georgia Avenue

Address Line 4: Palo Alto, CALIFORNIA 84306

CHENODAL WITH MAN	
Joseph I. Hirsch	
/Joseph I. Hirsch/	
05/10/2013	

Total Attachments: 1

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OP \$40.00 7.

TRADEMARK REEL: 005025 FRAME: 0864

LLC-1A



# State of California Secretary of State

File# 201113610000

ENDORSED - FILED in the office of the Secretary of State of the State of California

MAY - 5 2011

# **Limited Liability Company** Articles of Organization - Conversion

IMPORTANT -- Read all instructions before completing this form

This Space For Filling Use Only

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Converted Entity Information					
<ol> <li>NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," or the abbreviations "LLC" or "L.L.C." The words "Limited" and "Company" may be abbreviated to "Ltd." and "Co.," respectively.)</li> </ol>					
Manchester Pharmaceutica	is LLC				
	LIABILTY COMPANY IS TO ENGAGE UNDER THE BEVERLY-KILLEA LIMIT		TY FOR WHICH A LIMITED LIABILITY		
3. THE LIMITED LIABILITY COMPAR	Y WILL BE MANAGED BY (Check only	one)			
ONE MANAGER	MORE THAN ONE MANAGE	GER 🗹 ALLLIN	NITED LIABILITY COMPANY MEMBER(S)		
4. MAILING ADDRESS OF THE CHI	EF EXECUTIVE OFFICE	CITY	STATE ZIP CODE		
Post Office Box 4531		Mountain View	CA 94040		
5. NAME OF AGENT FOR SERVICE OF PROCESS (Item 5: Enter the name of the agent for service of process. The agent may be an individual residing in California or a corporation that has filed a certificate pursuant to California Corporations Code section 1505. Item 6: If the agent is an individual, enter the agent's business or residential address in California. Item 7: If the converting entity is a California limited partnership, enter the mailing address of the individual or corporate agent. Check the box and omit the mailing address if the agent's mailing address is the same as the address in item 6.)					
Bruce C. Piontkowski, Esq.			• ′		
6. IF AN INDIVIDUAL, ADDRESS OF	AGENT FOR SERVICE OF PROCESS	IN CA CITY	STATE ZIP CODE		
Tingley Piontkowski LLP / 1	) Almaden Boulevard, Suite 430	San Jose	CA 95113		
7. MAILING ADDRESS OF AGENT F	OR SERVICE OF PROCESS	CITY	STATE ZIP CODE		
		•	·		
THE MAILING ADDRESS OF TH	E AGENT FOR SERVICE OF PROCESS IS 1	THE SAME AS THE AGENT'S BUSINES	SS OR RESIDENTIAL ADDRESS IN ITEM 6.		
Converting Entity Information			DEPARTMENT OF THE PROPERTY OF		
8. NAME OF CONVERTING ENTITY			•		
Manchester Pharmaceutical	s, Inc.				
9. FORM OF ENTITY	10. JURISDICTION	11. CA SECRETARY OF STATE FILE NUMBER, IF ANY			
Corporation	California		C3156913		
THAT EQUALED OR EXCEEDED TH	IE VOTE REQUIRED. IF A VOTE WAS R	EQUIRED, PROVIDE THE FOLLOW			
**************************************		D TO VOTE AND THE PERCEN	TAGE VOTE REQUIRED OF EACH CLASS		
Common Stock 1,000,000 shares			Majority		
Additional Information	ellikkinkannan propinsi kalantan kantan k		screen children control contro		
13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.					
14. I CERTIFY UNDER PENALTY OF OF MY OWN KNOWLEDGE. I DE May 7, 2014  DATE 10 DESCRIPTION OF AUTHORIZED P	CLARE I AM THE PERSON WHO EXEC	CUTED THIS INSTRUMENT, WHIP  Kenneth Greathouse C	THE FOREGOING IS TRUE AND CORRECT CH EXECUTION IS MY ACT AND DEED.  The image of the Board & Secretary of the Board & Sec		
SIGNATURE OF AUTHORIZED P	ERSON	TYPE OR PRINT NAME AND	TITLE OF AUTHORIZED PERSON		
LLC-1A (REV 04/2010)		OCCUPATION OF THE PROPERTY OF	APPROVED BY SECRETARY OF STATE		

**TRADEMARK REEL: 005025 FRAME: 0865** 

**RECORDED: 05/10/2013**