

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM301180

<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>
Futurescripts, LLC		07/02/2012	LIMITED LIABILITY COMPANY: PENNSYLVANIA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Catamaran PBM of Pennsylvania, LLC		
<b>Street Address:</b>	116 Pine Street		
<b>Internal Address:</b>	Suite 320		
<b>City:</b>	Harrisburg		
<b>State/Country:</b>	PENNSYLVANIA		
<b>Postal Code:</b>	17101		
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: PENNSYLVANIA		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	3240759	FUTURESCRIPTS	
<b>Registration Number:</b>	3309672	FUTURE SCRIPTS	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	213 250 79		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Phone:</b>	213 250 1800		
<b>Email:</b>	Mina.Hamilton@lewisbrisbois.com		
<b>Correspondent Name:</b>	Bryan P. Sugar		
<b>Address Line 1:</b>	221 North Figueroa Street		
<b>Address Line 2:</b>	Suite 1200		
<b>Address Line 4:</b>	Los Angeles, CALIFORNIA 90012		
<b>ATTORNEY DOCKET NUMBER:</b>	34431-02		
<b>NAME OF SUBMITTER:</b>	Mina I. Hamilton		
<b>SIGNATURE:</b>	/Mina I. Hamilton/		
<b>DATE SIGNED:</b>	04/11/2014		
<b>Total Attachments: 9</b> source=Pennsylvania#page1.tif			

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COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

MARCH 4, 2014

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

**Catamaran PBM of Pennsylvania, LLC.**

I, Carol Aichele, Secretary of the Commonwealth of Pennsylvania

do hereby certify that the foregoing and annexed is a true and correct

copy of

- 1 Certificate of Organization filed on April 5, 2006
- 2 LIMITED LIABILITY AMENDMENT filed on July 2, 2012
- 3 LIMITED LIABILITY AMENDMENT filed on October 15, 2013
- 4 CHANGE OF REGISTERED OFFICE - Domestic filed on October 15, 2013

which appear of record in this department.



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

A handwritten signature in black ink, appearing to read "Carol Aichele".

Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU

Certificate of Organization  
Domestic Limited Liability Company  
(15 Pa.C.S. § 8913)

Name	CT CORP-COUNTER		
Address	CT CORP-COUNTER		
City	State	Zip Code	

Document will be returned to the name and address you enter to the left.

Fee: \$125

In compliance with the requirements of 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company (designator is required, i.e., "company", "limited" or "limited liability company" or abbreviation):

FutureScripts, LLC

2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and Street	City	State	Zip	County
1901 Market Street	Philadelphia	Pennsylvania	19103	Philadelphia

(b) Name of Commercial Registered Office Provider  
c/o: County

3. The name and address, including street and number, if any, of each organizer is (all organizers must sign on page 2):

Name	Address
Christopher D. Butler Executive Vice President & Chief Operating Officer	OCC Insurance Company 1901 Market Street Philadelphia, PA 19103

Commonwealth of Pennsylvania  
CERTIFICATE OF ORGANIZATION 3 Page(s)



T0610160142

TRADEMARK

REEL: 005258 FRAME: 0774

DSCB:15-8913-2

4. *Strike out if inapplicable term*  
*A member's interest in the company is to be evidenced by a certificate of membership interest.*

5. *Strike out if inapplicable:*  
Management of the company is vested in a manager or managers.

6. The specified effective date, if any is: upon filing  
month date year hour, if any

7. *Strike out if inapplicable: This company is a restricted professional company organized to render the following*  
*various professional services:*

8. For additional provisions of the certificate, if any, attach an 8 1/2 x 11 sheet.

IN TESTIMONY WHEREOF, the organizer(s) has (have)  
signed this Certificate of Organization this

23rd day of March 2008.

x 

Signature

Christopher D. Butler  
Executive Vice President &  
Chief Operating Officer  
QCC Insurance Company

Signature

PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU

Certificate of Amendment-Domestic  
(15 Pa.C.S.)

- Limited Partnership (§ 8512)  
 Limited Liability Company (§ 8951)

Name	CT COUNTER		
Address			
City	State	Zip Code	
8505312	SO PA	43	

Document will be returned to the name and address you enter to the left.



Commonwealth of Pennsylvania  
LIMITED LIABILITY AMENDMENT 4 Page(s)



T1218558007

Fee: \$70

In compliance with the requirements of the applicable provisions (relating to certificate of amendment), the undersigned, desiring to amend its Certificate of Limited Partnership/Organization, hereby certifies that:

1. The name of the limited partnership/limited liability company is:  
FutureScripts, LLC

2. The date of filing of the original Certificate of Limited Partnership/Organization: April 5, 2006

3. Check, and if appropriate complete, one of the following:

The amendment adopted by the limited partnership/limited liability company, set forth in full, is as follows:

The name of the limited liability company is Catamaran PBM of Pennsylvania, LLC.

The amendment adopted by the limited partnership/limited liability company is set forth in full in Exhibit A attached hereto and made a part hereof.

4. Check, and if appropriate complete, one of the following:

The amendment shall be effective upon filing this Certificate of Amendment in the Department of State.

The amendment shall be effective on: \_\_\_\_\_ at \_\_\_\_\_.  
Date Hour

5. Check if the amendment restates the Certificate of Limited Partnership/Organization:

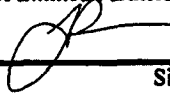
The restated Certificate of Limited Partnership/Organization supersedes the original Certificate of Limited Partnership/Organization and all previous amendments thereto.

IN TESTIMONY WHEREOF, the undersigned limited partnership/limited liability company has caused this Certificate of Amendment to be executed this

2nd day of July, 2012

FutureScripts, LLC

\_\_\_\_\_  
Name of Limited Partnership/Limited Liability Company



\_\_\_\_\_  
Signature

Secretary

\_\_\_\_\_  
Title

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Certificate of Amendment-Domestic  
(15 Pa.C.S.)

Limited Partnership (§ 8512)  
 Limited Liability Company (§ 8951)

Name Catamaran PBM of Pennsylvania, LLC		
Address 1600 McConnor Parkway		
City Schaumburg	State IL	Zip Code 60173

Document will be returned to the name and address you enter to the left.

Commonwealth of Pennsylvania  
LIMITED LIABILITY AMENDMENT 2 Page(s)



T1329164051

Fee: \$70

In compliance with the requirements of the applicable provisions (relating to certificate of amendment), the undersigned, desiring to amend its Certificate of Limited Partnership/Organization, hereby certifies that:

1. The name of the limited partnership/limited liability company is:  
Catamaran PBM of Pennsylvania, LLC

2. The date of filing of the original Certificate of Limited Partnership/Organization: April 5, 2006

3. Check, and if appropriate complete, one of the following:

The amendment adopted by the limited partnership/limited liability company, set forth in full, is as follows:

The principal office address has changed to 1600 McConnor Parkway, Schaumburg,  
IL 60173.

The amendment adopted by the limited partnership/limited liability company is set forth in full in Exhibit A attached hereto and made a part hereof.

4. Check, and if appropriate complete, one of the following:

The amendment shall be effective upon filing this Certificate of Amendment in the Department of State.

The amendment shall be effective on,   <sup>d</sup> at   .  
Date Hour

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5. Check if the amendment restates the Certificate of Limited Partnership/Organization:

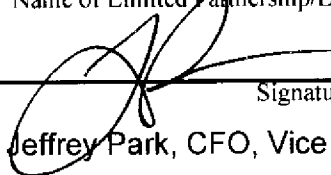
The restated Certificate of Limited Partnership/Organization supersedes the original Certificate of Limited Partnership/Organization and all previous amendments thereto.

IN TESTIMONY WHEREOF, the undersigned limited partnership/limited liability company has caused this Certificate of Amendment to be executed this

1 10<sup>th</sup> day of October, 2013.

Catamaran PBM of Pennsylvania, LLC

\_\_\_\_\_  
Name of Limited Partnership/Limited Liability Company

  
\_\_\_\_\_  
Signature

Jeffrey Park, CFO, Vice President of Finance

\_\_\_\_\_  
Title

**PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

**Statement or Certificate of Change of Registered Office (15 Pa.C.S.) for  
(check one):**

- Domestic Business Corporation (§ 1507)
- Foreign Business Corporation (§ 4144)
- Domestic Nonprofit Corporation (§ 5507)
- Foreign Nonprofit Corporation (§ 6144)
- Domestic Limited Partnership (§ 8506)
- Domestic Limited Liability Company (§ 8906)

Name		
Catamaran PBM of Pennsylvania, LLC		
Address		
1600 McConnor Parkway		
City	State	Zip Code
Schaumburg	IL	60173

Commonwealth of Pennsylvania  
DOMESTIC - CHANGE OF REGISTERED OFFICE 2 Page(s)



Fee: \$5

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. (relating to change of registered office), the undersigned corporation, limited partnership or limited liability company, desiring to effect a change of registered office, hereby states that:

1. The name is:  
Catamaran PBM of Pennsylvania, LLC

2. Current address as registered with the Department of State. *Complete part (a) or (b) – not both:*

(a) The address of its current registered office in this Commonwealth is:

1901 Market Street	Philadelphia	PA	60173	Philadelphia
Number and street	City	State	Zip	County

(b) The name of its current commercial registered office provider and the county of venue is:

c/o:

Name of Commercial Registered Office Provider	County
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3. New address. *Complete part (a) or (b) – not both:*

(a) The address in this Commonwealth to which the registered office of the corporation, limited partnership or limited liability company is to be changed is:

116 Pine Street, Suite 320	Harrisburg	PA	17101	Dauphin
Number and street	City	State	Zip	County

(b) The registered office of the corporation, limited partnership or limited liability company shall be provided by:

c/o:

Name of Commercial Registered Office Provider	County
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PA DEPT OF STATE

4. *For corporations only:*

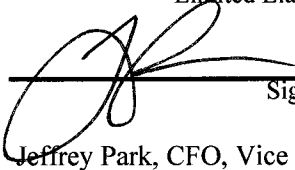
Such change was authorized by the Board of Directors of the corporation.

IN TESTIMONY WHEREOF, the undersigned has caused this Statement or Certificate of Change of Registered Office to be signed by a duly authorized officer, general partner, member or manager thereof this

\_\_\_\_\_ day of October, 2013 .

Catamaran PBM of Pennsylvania, LLC

Name of Corporation/Limited Partnership/  
Limited Liability Company



Signature

Jeffrey Park, CFO, Vice President of Finance

Title