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Electronic Trademark Assignment System
Trademark Assignment Recordation FormETAS v.1.7
Navigation: <u>Guidelines - Conveyance Type - Correspondence - PTO-1594</u> (Rev. 11/15)

<u>Conveyor - Receiver - Property - Attachments - SignOMB No. 0651-0027</u> (Exp. 04/30/2015)

Signature

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The request must be signed by the filer. The request will not be "signed" in the sense of a traditional paper document. To sign the request, the signer must enter any combination of printable characters that have been adopted to serve the function of a signature, preceded and followed by the forward slash(/) symbol. Acceptable "signatures" could include: /john doe/; /jd/; and /123-4567/.

Sign the request by completing the following fields

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06/11/2014

ET

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SUBMISSION TYPE:

NEW ASSIGNMENT

NATURE OF CONVEYANCE:

CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type	
II Evolve I P	FORMERLY GPX Communications, LLC	1077/17/700 X	LIMITED LIABILITY COMPANY: DELAWARE	

RECEIVING PARTY DATA

Name:	EvolveIP, LLC		
Street Address:	989 Old Eagle School Rd., Suite 815		
City:	Wayne		
State/Country:	PENNSYLVANIA		
Postal Code:	19087		
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE		

Property Type	Number	Word Mark		
Registration Number:	4324383	OSSMOSIS		
CORRESPONDENCE	DATA			
Fax Number: Phone: Email: Correspondence will be sent to a provided; if that is unsuccessful Correspondent Name: Address Line 1: Address Line 2: Address Line 4:	I, it will be sent via U Camille M. Mi Cozen O'Conn 1900 Market S	en.com first; if that is unsuccessful, it will be sent using a fax number, if US Mail. Miller moor		
NAME OF SUBMITTE	ER:	Camille M. Miller		
Signature:		/Camille M/ Miller/		
Date:	·	06/12/2014		
Total Attachments: 1 source=EVOLVEIP LLC	C DE PL-DE - S	Secretary of State-173915-1#page2.tif		
Signature: □ //Camille	M/ Miller/			
Name: Camille M. Miller				
Date: 06/12/20	14			
Next Screen Bac	k	-Cancel	Save	
- <u>.HOME INDEX</u> -	(<u>SEARCH</u>	eBUSINESS CONTACT US PRIVACY STATEMEN	<u>ΙΤ</u>	

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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM304318

SUBMISSION TYPE:	NEW ASSIGNMENT
	To correct typographical error in registrant name and to correct registrant state of incorporation. Registrant's correct name is EvolveIP, LLC and state of incorporation is Delaware.

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Evolve IP		05/13/2014	LIMITED LIABILITY COMPANY: PENNSYLVANIA

RECEIVING PARTY DATA

Name:	EvolvelP	·
Street Address:	989 Old Eagle School Rd., Suite 815	
City:	Wayne	
State/Country:	PENNSYLVANIA	
Postal Code:	19087	
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE	

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark		
Registration Number:	4324383	OSSMOSIS		

CORRESPONDENCE DATA

Fax Number:

2157012273

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

Phone:

2156657273

Email:

cmiller@cozen.com

Correspondent Name:

Camille M. Miller

Address Line 1:

1900 Market Street

Address Line 2:

IP Department

Address Line 4:

Philadelphia, PENNSYLVANIA 19103

ATTORNEY DOCKET NUMBER:	EVIP/348245	•	· ·
NAME OF SUBMITTER:	Camille M. Miller		2.4.2
SIGNATURE:	/Camille M. Miller/		有藥
DATE SIGNED:	05/13/2014		

Total Attachments: 1

source=EVOLVEIP, LLC Corporate Information#page1.tif

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State of Delaware Secretary of State Division of Corporations Delivered 01:13 FM 02/13/2008 FILED 12:57 PM 02/13/2008 SRV 080153587 - 4305836 FILE

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

- 1. Name of Limited Liability Company: GPX Communications, LLC.
- 2. The Certificate of Formation of the limited liability company is hereby amended to delete Article FIRST of the Certificate of Formation and substitute the following in place thereof:

"FIRST: The name of limited liability company is EvolveIP, LLC."

IN WITNESS WHEREOF, the undersigned has executed this Certificate on the day of February, 2008.

Thomas Gravina

Chief Executive Officer

PHIL1 771480-1

RECORDED: 05/13/2014

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