

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM309160

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION
SEQUENCE:	1

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
GENEX Services, Inc.		05/30/2014	CORPORATION: PENNSYLVANIA

RECEIVING PARTY DATA

Name:	GENEX Services, LLC
Street Address:	440 East Swedesford Road, Suite 1000
City:	Wayne
State/Country:	PENNSYLVANIA
Postal Code:	19087
Entity Type:	LIMITED LIABILITY COMPANY: PENNSYLVANIA

PROPERTY NUMBERS Total: 14

Property Type	Number	Word Mark
Registration Number:	4457394	UR FAST TRACK
Registration Number:	3886086	RISKID
Registration Number:	3092077	THE PEOPLE YOU COUNT ON. THE OUTCOME YOU
Registration Number:	2962799	INTRACORP
Registration Number:	2597116	CLAIMS TOOLBOX
Registration Number:	2420271	REFERRAL EXPERT
Registration Number:	2267923	CLINICAL GUIDELINES TOOL
Registration Number:	2267922	ASSESSMENT REFERENCE TOOL
Registration Number:	2042174	GENEX
Registration Number:	1664615	INFER
Registration Number:	1552236	INTRACORP PREFERRED CARE
Registration Number:	1312563	INTRACORP
Registration Number:	1292513	ACCUMED
Registration Number:	1135915	INTERNATIONAL REHABILITATION ASSOCIATES

CORRESPONDENCE DATA

Fax Number: 2158511045

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.

TRADEMARK

Phone: 215-568-6200
Email: msf@hangley.com
Correspondent Name: Michele Fenkel
Address Line 1: One Logan Square, 27th Floor
Address Line 4: Philadelphia, PENNSYLVANIA 19103

NAME OF SUBMITTER:	Michele Fenkel
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SIGNATURE:	/msf/
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DATE SIGNED:	06/30/2014
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Total Attachments: 6

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PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Articles/Certificate of Merger

(15 Pa.C.S.)

- Domestic Business Corporation (§ 1926)
- Domestic Nonprofit Corporation (§ 5926)
- Limited Partnership (§ 8547)

Name _____
Address _____
City _____
Corporation Service Company

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

Commonwealth of Pennsylvania
ARTICLES OF MERGER-BUSINESS 7 Page(s)



Fee: \$150 plus \$40 additional for each Party in additional to two

In compliance with the requirements of the applicable provisions (relating to articles of merger or consolidation), the undersigned, desiring to effect a merger, hereby state that:

1. The name of the ~~corporation/partnership~~ ^{limited liability company} surviving the merger is:
Gem Conversion, LLC

2. Check and complete one of the following:
 The surviving corporation/limited partnership is a domestic business/nonprofit corporation/limited partnership and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
(b) Name of Commercial Registered Office Provider c/o Corporation Service Company				County Dauphin

The surviving corporation/limited partnership is a qualified foreign business/nonprofit corporation /limited partnership incorporated/formed under the laws of _____ and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
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(b) Name of Commercial Registered Office Provider _____ County _____
c/o _____

The surviving corporation/limited partnership is a nonqualified foreign business/nonprofit corporation/limited partnership incorporated/formed under the laws of _____ and the address of its principal office under the laws of such domiciliary jurisdiction is:

Number and Street	City	State	Zip
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PA DEPT OF STATE

3. The name and the address of the registered office in this Commonwealth or name of its commercial registered office provider and the county of venue of each other domestic business/nonprofit corporation/limited partnership and qualified foreign business/nonprofit corporation/limited partnership which is a party to the plan of merger are as follows:

Name	Registered Office Address	Commercial Registered Office Provider	County
GENEX Services, Inc.	440 East Swedesford Rd., Ste. 1000, Wayne, PA	19087	Chester

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

The plan of merger shall be effective upon filing these Articles/Certificate of Merger in the Department of State.

The plan of merger shall be effective on: _____ at _____
Date Hour

5. The manner in which the plan of merger was adopted by each domestic corporation/limited partnership is as follows:

Name	Manner of Adoption
GENEX Services, Inc.	Adopted in accordance with 15 Pa.C.S. § 1903
Gem Conversion, LLC	Adopted in accordance with 15 Pa.C.S. § 8957

6. ~~Strike out this paragraph if no foreign corporation/limited partnership is a party to the merger. The plan was authorized, adopted or approved, as the case may be, by the foreign business/nonprofit corporation/limited partnership (or each of the foreign business/nonprofit corporations/limited partnerships) party to the plan in accordance with the laws of the jurisdiction in which it is incorporated/organized.~~

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

The plan of merger is set forth in full in Exhibit A attached hereto and made a part hereof.

Pursuant to 15 Pa.C.S. § 1901/§ 8547(b) (relating to omission of certain provisions from filed plans) the provisions, if any, of the plan of merger that amend or constitute the operative provisions of the Articles of Incorporation/Certificate of Limited Partnership of the surviving corporation/limited partnership as in effect subsequent to the effective date of the plan are set forth in full in Exhibit A attached hereto and made a party hereof. The full text of the plan of merger is on file at the principal place of business of the surviving corporation/limited partnership, the address of which is:

440 East Swedesford Rd., Ste. 1000	Wayne	PA	19087	Chester
Number and street	City	State	Zip	County

IN TESTIMONY WHEREOF, the undersigned corporation/limited partnership has caused these Articles/Certificate of Merger to be signed by a duly authorized officer thereof this

30th day of May

2014

GENEX Services, Inc.

Name of Corporation/Limited Partnership

[Handwritten Signature]

Signature

VICE PRESIDENT AND CHIEF FINANCIAL OFFICER

Title

Gem Conversion, LLC

Name of Corporation/Limited Partnership

Signature

Title

IN TESTIMONY WHEREOF, the undersigned corporation/limited partnership has caused these Articles/Certificate of Merger to be signed by a duly authorized officer thereof this

30th day of May

2014

GENEX Services, Inc.

Name of Corporation/Limited Partnership

Signature

Title

Gem Conversion, LLC

Name of Corporation/Limited Partnership

Signature

Vice President and Secretary

Title

**EXHIBIT A
TO THE CERTIFICATE OF MERGER
OF
GENEX SERVICES, INC.
INTO
GEM CONVERSION, LLC**

Upon the filing of the Certificate of Merger, Article First of Gem Conversion, LLC's Certificate of Organization is hereby amended to read as follows:

FIRST: The name of the limited liability company (hereinafter call the "Company") is:

GENEX SERVICES, LLC

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

Consent to Appropriation of Name
(19 Pa.Code § 17.2)

Pursuant to 19 Pa. Code § 17.2 (relating to appropriation of the name of a senior corporation) the undersigned association, desiring to consent to the appropriation of its name by another association, hereby certifies that:

1. The name of the association executing this Consent of Name is:
GENEX Services, Inc.

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
440 East Swedesford Road, Suite 1000	Wayne	PA	19087	Chester

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

3. The date of its incorporation or other organization is:
10/23/1978

4. The statute under which it was incorporated or otherwise organized is:
Pennsylvania Business Corporation Law of 1988, as amended.

5. The association(s) entitled to the benefit of this Consent of Name is(are):
Gem Conversion, LLC

6. The consenting association is about to (check one):
 Change its name Cease to do business Withdraw from doing business in PA Is being wound up

IN TESTIMONY WHEREOF, the undersigned association has caused this consent to be signed by a duly authorized officer thereof this 30th day of May, 2014.

[Signature]
Signature
Vice President And Chief Financial
OFFICER Title