

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM323017

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
SMART PAYMENT PLAN, LLC		09/24/2012	LIMITED LIABILITY COMPANY: CALIFORNIA
RECEIVING PARTY DATA			
Name:	SMART PAYMENT PLAN, LLC		
Street Address:	999 Vanderbilt Beach Road, Suite 200		
City:	Naples		
State/Country:	FLORIDA		
Postal Code:	34108		
Entity Type:	LIMITED LIABILITY COMPANY: FLORIDA		
PROPERTY NUMBERS Total: 10			
Property Type	Number	Word Mark	
Registration Number:	3744489	PAY SMART. SAVE MONEY.	
Registration Number:	3893167	SAVE MONEY. PAY SMART.	
Registration Number:	4050574	MATCH PAYMENTS TO PAYDAYS	
Registration Number:	4128455	MATCH SMALLER PAYMENTS TO PAYDAYS	
Registration Number:	4355005	PAY SMART. BE HAPPY.	
Registration Number:	4355318	LET US PAY YOUR BILLS	
Serial Number:	86153780	OFFER LOWER PAYMENTS	
Serial Number:	86153781	OFFER SMALLER PAYMENTS	
Serial Number:	86153782	HOW OFTEN DO YOU GET PAID?	
Serial Number:	86169873	SMARTPAY	
CORRESPONDENCE DATA			
Fax Number:			
<i>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.</i>			
Phone:	7035258009		
Email:	uspto@tm4smallbiz.com		
Correspondent Name:	Erik M Pelton		
Address Line 1:	P.O. Box 100637		
Address Line 4:	Arlington, VIRGINIA 22210		

OP \$265.00 3744489

NAME OF SUBMITTER:	Erik M. Pelton
SIGNATURE:	/ErikMPelton/
DATE SIGNED:	11/12/2014
Total Attachments: 3 source=FL-Articles of Organization#page2.tif source=FL-Articles of Organization#page3.tif source=FL-Articles of Organization#page4.tif	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SMART PAYMENT PLAN, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

999 VANDERBILT RD
NAPLES, FL 34108

Mailing Address:

12100 WILSHIRE BLVD., 8TH FLOOR
SANTA MONICA, CA
90025

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

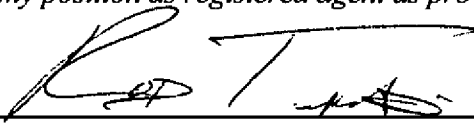
RODNEY TOBIASON
Name

999 VANDERBILT BEACH RD.
Florida street address (P.O. Box **NOT** acceptable)

NAPLES, FL 34108
City, State, and Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2012 SEP 27 AM 11:31

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

2012 SEP 27 AM 11:31

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

DAVID W. ENGELMAN
54 RAINY ST. # 908
AUSTIN, TX 78701

MGRM

RODNEY TOBIASON
1124 WHITEHEART CT.
MARCO ISLAND, FL 34145

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 9.24.2012 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

DAVID W. ENGELMAN

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)