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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM325233

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER AND CHANGE OF NAME
EFFECTIVE DATE:	01/30/2014

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Rehabilitation Centers, Inc.		01/29/2014	CORPORATION: MISSISSIPPI

NEWLY MERGED ENTITY DATA

Name	Execution Date	Entity Type
Rehab Merger Sub, LLC	01/29/2014	LIMITED LIABILITY COMPANY: MISSISSIPPI

MERGED ENTITY'S NEW NAME (RECEIVING PARTY)

Name:	Rehabilitation Centers, LLC
Street Address: 830 Crescent Centre Drive	
Internal Address:	Suite 610
City:	Franklin
State/Country:	TENNESSEE
Postal Code:	37067
Entity Type:	LIMITED LIABILITY COMPANY: MISSISSIPPI

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	3852349	MILLCREEK

CORRESPONDENCE DATA

900309134

Fax Number: 6152446804

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.

Phone: 615-850-8741

rfelber@wallerlaw.com Email: **Correspondent Name:** Robert P. Felber, Jr.

Address Line 1: c/o Waller Lansden Dortch & Davis, LLP

Address Line 2: 511 Union Street, Suite 2700 Address Line 4: Nashville, TENNESSEE 37219

ATTORNEY DOCKET NUMBER:	026219.14946
NAME OF SUBMITTER:	Robert P. Felber, Jr.
SIGNATURE:	/ROBERT P. FELBER, JR./

TRADEMARK

REEL: 005414 FRAME: 0193

DATE SIGNED:	12/05/2014			
Total Attachments: 6				
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TRADEMARK REEL: 005414 FRAME: 0194

State of Mississippi

Secretary of State's Office C. Delbert Hosemann, Jr.

Secretary of State Jackson, Mississippi

REHABILITATION CENTERS, LLC

Business ID: 1034858

The attached 5 pages are true and correct copies of documents filed in the Mississippi Secretary of State's Office pursuant to the Mississippi Code of 1972 Annotated.

This the 10th day of February, 2014.

SECRETARY OF STATE P.O. Box 136 Jackson, MS 39205 (601) 359-1633

C. Dellet Hosemann, dr.

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 13181378-1 Reference: Matt

Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp

TRADEMARK

REEL: 005414 FRAME: 0195

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OFFICE OF THE MISSISSIPPI SECRETARY OF STATE P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1333 Articles of Merger or Certificate of Merger For Cross Entity Mergers

The undersigned business entitles pursuant to Sections 79-4-11.05 and/or 79-29-209, as amended, hereby execute the following document and sets forth:

	1. Name and Type of Entity 1	
⇔	Rehabilitation Centers, Inc.	~
	2. Name and Type of Entity 2	C C
₽	Rehab Merger Sub, LLC	α Ú
	3. Name and Type of Entity 3	
⇔		
⇔	4. The future effective date is (Complete if applicable)	2
	5. Mark appropriate box The Plan of Merger is attached (required for merger involving domestic Limited Liability Company). OR The Plan of Merger is not attached, nor required to be attached.	ZUI4 JAN 3U A
	6. (a) Name and Type of Surviving Entity	
⇔	Rehab Merger Sub, LLC	<u> </u>
Û	(b) Jurisdiction of Surviving Entity Mississippi	
	7. The plan of merger has been approved and executed by each party to the merger. For each domestic limited liability company, the plan of merger was duly approved by the members and if voting by any separate voting group was required, by each such separate	

voting group, in the manner required by the Mississippi Limited Liability Company Act and the certificate of formation and limited liability company agreement

8. The plan of merger and the performance of its terms are duly authorized by all actions required by the laws under which each entity is organized, or by which each entity is governed, and by each entity's organizational (locuments.

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OFFICE OF THE MISSISSIPPI SECRETARY OF STATE P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1333 Articles of Merger or Certificate of Merger For Cross Entity Mergers

	9. Mark appropriate be	ox (Applicable	to each corporation	n which is a party to the	he merger).			
⇒	(a) Shareholder approval of the plan of merger was not required.							
₽	separate voting required by the	group was requ Mississippi Bu	aired, by each such s siness Corporation A	hareholders and, if voti eparate voting group, i Act and the articles of in	n the manner ncorporation;		2968	
हिंद्≠	be cast	Ignation, number by each class eation were	er of outstanding she ntitled to vote separa	ares, and number of vot ately on the plan as to e	es entitled to each		0.5	
	Name of Corporation	Class	No. of outstanding	No. of votes entitled to be cast	No. of votes			
⇔								
\$,				2014 JAN	
	AND EITHER a, the total number of separately on the plant	of votes cast for	and against the plan	n by each class entitled	to vote		AN 30	
	Name of Corporation	.Class	Total no. of v				AK :::	
⇔							153 4±	
⇔						•		
	OR b. the total number	of undisputed v	otes cast for the plan	n separately by each cla	iss was			
	Name of Corporation	Class	Total no. of t	undisputed OR the Plan			Å	
⇔						·		
⇔								

And the number of votes present and the number of votes cast for the plan by each class was

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sufficient for approval by that class.

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OFFICE OF THE MISSISSIPPI SECRETARY OF STATE P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1333 Articles of Merger or Certificate of Merger For Cross Entity Mergers

Name	of Entity 1					
Rehabi	ilitation Centers, l	inc.				
Ву:	Signature	Cíh	(Pleaso ko	eep writing within blocks)		2968
	Printed Name	Christopher L. Howard	Title	VP and Secretary	to the second se	0.5
Name	of Entity 2				n .	• .
Rehab	Merger Sub, LL	2				
Ву:	Signature	Cíh	(Please)	eep writing within blocks)		2014 JAN 30
	Printed Name	Christopher L. Howard	Title	VP & Secretary] .	图:11:42
Name	of Entity 3	·			7 .	7,1
Ву:	Signature		(Picase	keep writing within blocks)		
	Printed Name		Title		7	•

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TRADEMARK REEL: 005414 FRAME: 0198

PLAN OF MERGER

OF

REHABILITATION CENTERS, INC. (a Mississippi corporation)

with and into

REHAB MERGER SUB, LLC (a Mississippi corporation)

THIS PLAN OF MERGER (the "Plan") is made and entered into as of this <u>Aq'</u>day of January, 2014, by and between Rehabilitation Centers, Inc., a Mississippi corporation ("Merging Corporation"), and Rehab Merger Sub, LLC, a Mississippi limited liability company ("Surviving Company").

WHEREAS, the board of directors and sole shareholder of the Merging Corporation and the sole member of the Surviving Company have determined that it is in the best interests of their respective companies to effect the Merger, as defined below, provided for herein upon the terms and conditions set forth herein;

NOW, THEREFORE, in consideration of the foregoing, the parties hereto adopt the following Plan of Merger and agree as follows:

- 1. The undersigned intend that (i) the Plan of Merger constitutes a "plan of liquidation" within the meaning of Section 332 of the Internal Revenue Code of 1986, as amended (the "Code"), and the Treasury regulations thereunder and (ii) the Merger shall qualify as a complete liquidation of the Merging Corporation under Section 332 of the Code and Treasury regulations thereunder.
- 2. Subject to the terms and conditions of this Plan, the Merging Corporation shall be merged with and into Surviving Company, and the separate corporate existence of Merging Corporation shall thereupon cease (collectively, the "Merger"). The corporate identity, existence, powers, rights and immunities of Surviving Company shall continue unimpaired by the Merger, and Surviving Company shall succeed to and shall possess all the assets, properties, rights, privileges, powers, franchises, immunities and purposes, and be subject to all the debts, liabilities, obligations, restrictions and duties of Merging Corporation, all without further act or deed. Surviving Company shall continue to be governed by the laws of the State of Mississippi.
- 4. At the Effective Time, the outstanding ownership interests of Surviving Company immediately prior to the merger shall remain outstanding and unchanged, and the outstanding capital stock of Merging Corporation immediately prior to the Merger shall be cancelled without consideration.
 - 5. The name of the Surviving Company shall be changed to Rehabilitation Centers, LLC.

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IN WITNESS WHEREOF, the undersigned have caused this Plan to be executed as of the date first set forth above.

REHABILITATION CENTERS, INC.

By:

Christopher L. Howard Vice President and Secretary 296805

REHAB MERGER SUB, LLC

Ву:

Christopher L. Howard Vice President and Secretary

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