

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM331961

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Homeworks, Inc.		12/19/2013	CORPORATION: OHIO
RECEIVING PARTY DATA			
Name:	Arhaus, LLC		
Street Address:	7700 Northfield Road		
City:	Walton Hills		
State/Country:	OHIO		
Postal Code:	44146		
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE		
PROPERTY NUMBERS Total: 7			
Property Type	Number	Word Mark	
Serial Number:	86078955	ARHAUS THE LOFT	
Serial Number:	86122760	ARHAUS TABLE	
Serial Number:	86122896	GREENHAUS	
Serial Number:	77955959	ARHAUS JEWELS	
Serial Number:	77136639	FURNISHING A BETTER WORLD	
Serial Number:	75923426	ARHAUS	
Serial Number:	74272332	ARHAUS FURNITURE	
CORRESPONDENCE DATA			
Fax Number:	2163639001		
<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:	216.363.9000		
Email:	uspto@faysharpe.com		
Correspondent Name:	Colleen Flynn Goss		
Address Line 1:	1228 Euclid Avenue		
Address Line 2:	The Halle Building, 5th Floor		
Address Line 4:	Cleveland, OHIO 44115		
ATTORNEY DOCKET NUMBER:	SKOZ000011US01		
NAME OF SUBMITTER:	Colleen Flynn Goss		
SIGNATURE:	/colleenfgoss/		

OP \$190.00 86078955

DATE SIGNED:	02/12/2015
Total Attachments: 4 source=DOC500#page1.tif source=DOC500#page2.tif source=DOC500#page3.tif source=DOC500#page4.tif	



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/19/2013	201335300852	CONVERSION WITHIN SOS RECORDS (CVS)	125.00	300.00		.00	.00

Receipt

This is not a bill. Please do not remit payment.

BAKER & HOSTETLER LLP
 ATTN SONIA K. LOWE
 65 E STATE ST. STE 2100
 COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

479467

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
 ARHAUS, LLC

and, that said business records show the filing and recording of:

Document(s)

CONVERSION WITHIN SOS RECORDS

Document No(s):

201335300852

Effective Date: 12/19/2013

CHANGE BUSINESS TYPE FOR. PROFIT LIM. LIAB. CO.

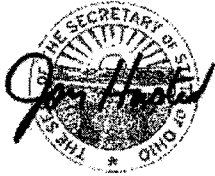


United States of America
 State of Ohio
 Office of the Secretary of State

Witness my hand and the seal of
 the Secretary of State at Columbus,
 Ohio this 19th day of December,
 A.D. 2013.

Jon Husted

Ohio Secretary of State



Form 700 Prescribed by:
JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Makes checks payable to Ohio Secretary of State

Mail this form to one of the following:
Regular Filing (non expedite)
P.O. Box 1329
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1980
Columbus, OH 43216

Certificate for Conversion for Entities Converting Within or Off the Records of the Ohio Secretary of State Filing Fee: \$125

(CHECK ONLY ONE (1) BOX)

(1) Converting Within The Records of the Ohio Secretary of State

(2) Converting Off The Records of the Ohio Secretary of State
(187-VXX)

Name of the converting entity

Jurisdiction of Formation

Charter/Registration Number

The converting entity is a:
(Check Only (1) One Box)

- | | |
|--|---|
| <input checked="" type="checkbox"/> Domestic Corporation (For-Profit or Nonprofit) | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Foreign Corporation (For-Profit or Nonprofit) | <input type="checkbox"/> Domestic Limited Partnership |
| <input type="checkbox"/> Domestic Nonprofit Limited Liability Company | <input type="checkbox"/> Foreign Limited Partnership |
| <input type="checkbox"/> Foreign Nonprofit Limited Liability Company | <input type="checkbox"/> Domestic Limited Liability Partnership |
| <input type="checkbox"/> Domestic For-Profit Limited Liability Company | <input type="checkbox"/> Foreign Limited Liability Partnership |
| <input type="checkbox"/> Foreign For-Profit Limited Liability Company | |

The converting entity hereby states that it has complied with all laws in the jurisdiction under which it exists and that those laws permit the conversion.

2013 DEC 19 PM 12:52
CLERK OF PUBLIC RECORDS

STATE OF OHIO DEPARTMENT OF REVENUE

Name of the converted entity

Jurisdiction of Formation

The converted entity is a:
(Check Only (1) One Box)

Domestic Corporation (For-Profit) Partnership

Foreign Corporation (For-Profit or Nonprofit) Domestic Limited Partnership

Domestic Nonprofit Limited Liability Company Foreign Limited Partnership

Foreign Nonprofit Limited Liability Company Domestic Limited Liability Partnership

Domestic For-Profit Limited Liability Company Foreign Limited Liability Partnership

Foreign For-Profit Limited Liability Company

Effective Date (The conversion is effective upon the filing of this certificate or on a later date specified in the certificate)

Name and address of the person or entity that will provide a copy of the declaration of conversion upon written request.

Name

Mailing Address

City
State
Zip Code

Required information that must accompany conversion certificate if box 2 is checked

If the converting entity is a domestic or foreign entity that will not be licensed in Ohio, provide the name and address of the statutory agent upon whom any process, notice or demand may be served.

Name of Statutory Agent

Mailing Address

City
State
Zip Code

If the agent is an individual using a P.O. Box, check this box to confirm that the agent is an Ohio resident.

See instructions for additional filing requirements if

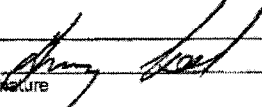
(1) the conversion creates a new domestic entity,

(2) the converted entity is a foreign entity that desires to transact business in Ohio; or

(3) if a domestic corporation or foreign corporation licensed in Ohio is the converting entity.

IN WITNESS WHEREOF, the conversion is authorized on behalf of the converting entity and that each person signing the certificate of conversion is authorized to do so.

Required
Must be signed by an
authorized representative.


Signature

By (if applicable)

Greg Teed
Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name