

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM333356

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
PlanSource Holdings, Inc.		03/01/2011	CORPORATION:
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	PlanSource Benefits Administration, Inc.		
<b>Street Address:</b>	101 South Garland Ave, Ste. 203		
<b>City:</b>	Orlando		
<b>State/Country:</b>	FLORIDA		
<b>Postal Code:</b>	32801		
<b>Entity Type:</b>	CORPORATION: FLORIDA		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Serial Number:</b>	77288612	PLANSOURCE	
<b>Registration Number:</b>	3544641	PLANSOURCE	
<b>Registration Number:</b>	0000000	ADMIRAL	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<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>			
<b>Phone:</b>	4074737529		
<b>Email:</b>	patricia.barnard@plansource.com		
<b>Correspondent Name:</b>	Patricia S Barnard		
<b>Address Line 1:</b>	101 South Garland Ave, Ste. 203		
<b>Address Line 4:</b>	Orlando, FLORIDA 32801		
<b>ATTORNEY DOCKET NUMBER:</b>	FL BAR NO.: 523402		
<b>NAME OF SUBMITTER:</b>	Patricia S. Barnard		
<b>SIGNATURE:</b>	/PSB/		
<b>DATE SIGNED:</b>	02/26/2015		
<b>Total Attachments: 5</b>			
source=PBA Name Change Filing#page1.tif			
source=PBA Name Change Filing#page2.tif			
source=PBA Name Change Filing#page3.tif			

OP \$90.00 77288612

source=PBA Name Change Filing#page4.tif

source=PBA Name Change Filing#page5.tif

Pa20000084590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

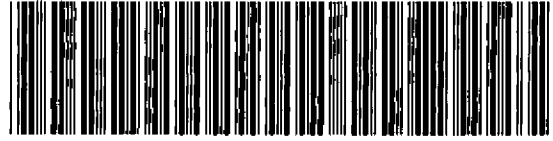
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

NOTE: 3 Certified Copies  
4 CUs's to reflect name change  
4 CUs's on new name

Office Use Only



000192989340

*Name Change  
& Amend*

03/03/11--01028--004 \*\*87.50

03/03/11--01028--005 \*\*43.75

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2011 MAR -3 PM 1:04  
NOT REMITTED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
2011 MAR -3 PM 3:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*AOR  
3/3*

TRADEMARK  
REEL: 005466 FRAME: 0835



**UCC Filing & Search Services, Inc.**  
 1574 Village Square Boulevard, Suite 100  
 Tallahassee, Florida 32309  
 (850) 681-6528

**HOLD**  
 FOR PICKUP BY  
 UCC SERVICES  
 OFFICE USE ONLY

March 3, 2011

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Plansource Holdings, Inc. nka Plansource Benefits Administration, Inc.

**Filing Evidence**

- Plain/Confirmation Copy - 1 set
- Certified Copy - 3 sets

**Type of Document**

- ~~Certificate of Status~~
- Certificates of Good Standing - 04 on new name
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other - 4 Certificates of fact referencing name change

**FILE FIRST**

**Retrieval Request**

- Photocopy
- Certified Copy

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2011 MAR -3 PM 3:10

PLANSOURCE HOLDINGS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P02000084590

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

PLANSOURCE BENEFITS ADMINISTRATION, INC.

*The new*

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

N/A

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

N/A

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

SHANE STREUFERT

New Registered Office Address:

111 W. JEFFERSON ST., STE 100

(Florida street address)

ORLANDO

(City)

Florida 32801

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Shane Streufert

Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>CFÓ</u>	<u>MARK LOWREY</u>	<u>111 W. JEFFERSON ST.</u> <u>SUITE 100</u> <u>ORLANDO, FLORIDA 32801</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>EVP</u>	<u>PHIL CAROLLO</u>	<u>111 W. JEFFERSON ST.</u> <u>SUITE 100</u> <u>ORLANDO, FLORIDA 32801</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>CFO</u>	<u>SHANE STREUFERT</u>	<u>111 W. JEFFERSON ST.</u> <u>SUITE 100</u> <u>ORLANDO, FLORIDA 32801</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

N/A

---

---

---

---

---

---

---

---

---

---

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

N/A

---

---

---

---

---

---

---

---

---

---

The date of each amendment(s) adoption: March 1, 2011

(date of adoption is required)

Effective date if applicable: N/A

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_"

(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated MARCH 1, 2011

Signature 

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DAYNE WILLIAMS

(Typed or printed name of person signing)

CEO

(Title of person signing)