

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM362466

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Koosharem, LLC		07/29/2015	LIMITED LIABILITY COMPANY: CALIFORNIA
RECEIVING PARTY DATA			
Name:	EmployBridge, LLC		
Street Address:	3820 STATE STREET		
City:	SANTA BARBARA		
State/Country:	CALIFORNIA		
Postal Code:	93105		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		
PROPERTY NUMBERS Total: 28			
Property Type	Number	Word Mark	
Serial Number:	86483601	SNAP SHOT SURVEY NOTING ASSOCIATE PERFOR	
Serial Number:	86594416	SINGLEPOINT SOLUTIONS	
Serial Number:	86551487	ORB	
Serial Number:	86125566	REFQUEST	
Serial Number:	86357721	RES DIN	
Serial Number:	86357707	VAUGHAN CONSULTING GROUP	
Serial Number:	86354840	SELECT STAFFING	
Serial Number:	86304302	THE SELECT FAMILY OF STAFFING COMPANIES	
Serial Number:	86014905	CANDID8	
Serial Number:	85920108	SENTINEL WORKFORCE SOLUTIONS	
Serial Number:	85641435	TEAMLINK	
Serial Number:	85479111	TYMENTRY	
Serial Number:	85140821	ISEARCH	
Serial Number:	85025084	ISTATEMENT	
Serial Number:	85024250	SELECT TRUCKERS PLUS	
Serial Number:	78938350		
Serial Number:	78914797	SELECTREMEDY	
Serial Number:	77627057	TYMETRICS	
Serial Number:	77892067	CPUTILITY	

OP \$715.00 86483601

Property Type	Number	Word Mark
Serial Number:	77702149	DEVELOP YOUR C.O.R.E. WORKFORCE
Serial Number:	77678676	REQUISTAFF
Serial Number:	77678675	REQUISTAFF
Serial Number:	77678674	CU THERE
Serial Number:	77678536	CU THERE
Serial Number:	77678468	STAFFPOD
Serial Number:	77217409	HIREPAY
Serial Number:	77195777	SELECT STAFFING
Serial Number:	77251669	ZIPLINE

CORRESPONDENCE DATA

Fax Number: 8054563906

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: 8054525267

Email: vcbird1995@gmail.com

Correspondent Name: VICTORIA CARVER

Address Line 1: PO BOX 206

Address Line 4: BELLEFONTE, PENNSYLVANIA 16823

ATTORNEY DOCKET NUMBER:	2015-502 (EB NAME CHANGE)
NAME OF SUBMITTER:	VICTORIA CARVER
SIGNATURE:	/VCARVER/
DATE SIGNED:	11/16/2015

Total Attachments: 1

source=Amended Articles of Organization#page1.tif

LLC-2

Amendment to Articles of Organization of a Limited Liability Company (LLC)

To change information of record for your California LLC, you can fill out this form, and submit for filing along with:

- A \$30 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.
- To file this form, the status of your LLC must be active on the records of the California Secretary of State, or if suspended, this form can only be filed to list a new LLC name.

Important! To change the LLC addresses, or to change the name or address of the LLC's agent for service of process, you must file a Statement of Information (Form LLC-12).

Items 4-6: Only fill out the information that is changing. Attach extra pages if you need more space or need to include any other matters.

FILED
Secretary of State
State of California

JUL 29 2015

This Space For Office Use Only

For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm.

1 LLC's Exact Name (on file with CA Secretary of State)

Koosharem, LLC

2 LLC File No. (issued by CA Secretary of State)

201003210080

Purpose

3 The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

New LLC Name (List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State.)

4 EmployBridge, LLC

Proposed LLC Name

The proposed new name must include: LLC, L.L.C., Limited Liability Company, Limited Liability Co., Ltd. Liability Co. or Ltd. Liability Company; and may not include: bank, trust, trustee, incorporated, inc., corporation, or corp., insurer, or insurance company.

Management (Check only one.)

5 The LLC will be managed by:

- One Manager
More Than One Manager
All Limited Liability Company Member(s)

Amendment to Text of the Articles of Organization (List both the current text, and the text as amended by this filing.)

6

Read and sign below: Unless a greater number is provided for in the Articles of Organization, this form must be signed by at least one manager, if the LLC is manager-managed or at least one member, if the LLC is member-managed.

Paul A Galleberg
Sign here

Paul Galleberg
Print your name here

Manager
Your business title

Make check/money order payable to: Secretary of State
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

By Mail
Secretary of State
Business Entities, P.O. Box 944228
Sacramento, CA 94244-2280

Drop-Off
Secretary of State
1500 11th Street, 3rd Floor
Sacramento, CA 95814