

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM364133

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Conversion		
SEQUENCE:	2		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Imagevision.net, Inc.		11/25/2015	CORPORATION: PENNSYLVANIA
RECEIVING PARTY DATA			
Name:	Imagevision.net, LLC		
Street Address:	5010 Ritter Road		
Internal Address:	suite 101		
City:	mechanicsburg		
State/Country:	PENNSYLVANIA		
Postal Code:	17055		
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	2782995	HEALTHPAY 24	
Registration Number:	3174566	HEALTHPAY	
Serial Number:	86683622	HEALTHFE	
CORRESPONDENCE DATA			
Fax Number:	3023003456		
<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:	3023003444		
Email:	trademarks-ch@btlaw.com		
Correspondent Name:	Edward F. Behm, Jr.		
Address Line 1:	1000 N. West Street		
Address Line 2:	Suite 1500		
Address Line 4:	Wilmington, DELAWARE 19801		
ATTORNEY DOCKET NUMBER:	60297-241842		
NAME OF SUBMITTER:	Edward F. Behm, Jr.		
SIGNATURE:	/efb/		
DATE SIGNED:	12/01/2015		

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Total Attachments: 8

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Entity# : 2728497
Date Filed : 11/25/2015
Effective Date : 11/26/2015
Pedro A. Cortés
Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Return document by mail to: PENNCORP SERVICE GROUP, INC. 610 NORTH SECOND STREET <i>22764</i> PO BOX 1210 HARRISBURG, PA 17108-1210 penncorp@penncorp.net	Statement of Conversion DECR-15-355  TCO151125MC1022
<input checked="" type="checkbox"/> Return document by email to: _____	

Read all instructions prior to completing.

Fee: \$70

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 355 (relating to Statement of conversion), the undersigned association, desiring to effect a conversion, hereby states that:

A. For the converting association:

1. The name of the converting association is: ImageVision.Net, Inc.

2. The jurisdiction of formation of the converting association is: Pennsylvania

3. The type of association is (check only one):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Business Trust |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership | <input type="checkbox"/> Other _____ |

4. Date on which the association was created, incorporated, formed or otherwise came into existence:

12/13/1996
(MM/DD/YYYY)

5. If the converting association is a domestic filing association (a Pennsylvania business corporation, nonprofit corporation, limited partnership, limited liability company, professional association or business trust), the statute under which it was first created, incorporated, formed or otherwise came into existence:

Business Corporation Law of 1988
(ex. Business Corporation Law of 1988, Limited Liability Company Law of 1994, etc.)

2015 NOV 25 PM 1: 14

COMM OF PA
DEPT OF STATE

TRADEMARK
REEL: 005679 FRAME: 0003

6. Check and complete one of the following addresses for the converting association.

<input checked="" type="checkbox"/>	<p>If the converting association is a domestic filing association, domestic limited liability partnership or registered foreign association, the current registered office address as on file with the Department of State. Complete part (a) OR (b) – not both:</p> <p>(a) <u>5010 Ritter Road Suite 101</u> <u>Mechanicsburg</u> <u>PA</u> <u>17055</u> <u>Cumberland</u> <small>Number and street City State Zip County</small></p> <p>(b) c/o: _____ <small>Name of Commercial Registered Office Provider County</small></p>
<input type="checkbox"/>	<p>If the converting association is a domestic association that is not a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:</p> <p>_____ <small>Number and street City State Zip County</small></p>
<input type="checkbox"/>	<p>If the converting association is a nonregistered foreign association, the address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office:</p> <p>_____ <small>Number and street City State Zip</small></p>

B. For the converted association:

1. The name of the converted association is: ImageVision.Net, LLC

2. The jurisdiction of formation of the converted association is: Delaware

3. The type of association is (check only one):

- | | | |
|---|--|---|
| <input type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Business Trust |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input checked="" type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership | <input type="checkbox"/> Other _____ |

4. Check and complete one of the following addresses for the converted association.

<input checked="" type="checkbox"/>	<p>If the converted association is a domestic filing association, domestic limited liability partnership or registered foreign association, its registered office address. Complete part (a) OR (b) – not both:</p> <p>(a) <u>5010 Ritter Road Suite 101</u> <u>Mechanicsburg</u> <u>PA</u> <u>17055</u> <u>Cumberland</u> <small>Number and street City State Zip County</small></p> <p>(b) c/o: _____ <small>Name of Commercial Registered Office Provider County</small></p>
<input type="checkbox"/>	<p>If the converted association is a domestic association that is not a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:</p> <p>_____ <small>Number and street City State Zip County</small></p>
<input type="checkbox"/>	<p>If the converted association is a nonregistered foreign association, complete both (1) and (2).</p> <p>(1) The address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office address:</p> <p>_____ <small>Number and street City State Zip</small></p> <p>(2) The name and address, including street and number, of its registered agent:</p> <p>_____ <small>Name of Registered Agent</small></p> <p>_____ <small>Number and street City State Zip</small></p>

C. Effective date of statement of conversion (check, and if appropriate complete, one of the following):

- This Statement of Conversion shall be effective upon filing in the Department of State.
- This Statement of Conversion shall be effective on: 11/26/2015 at _____
Date (MM/DD/YYYY) Hour (if any)

D. Approval of conversion by converting association (check only one):

- For converting association that is a domestic entity – The plan of conversion was approved in accordance with 15 Pa.C.S. Chapter 3, Subchapter E (relating to conversion).
- For converting association that is a foreign association – The conversion was approved in accordance with the law
- of the jurisdiction of formation of the converting association.

E. Attachments (see Instructions for required and optional attachments).


IN TESTIMONY WHEREOF, the undersigned converting association has caused this Statement of Conversion to be signed by a duly authorized officer thereof this 25 day of November, 2015.

ImageVision.Net, Inc.
Name of Converting Association

A. H. Miller
Signature

President & CEO
Title

**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: PENNCORP SERVICE GROUP, INC. 600 NORTH SECOND STREET PO BOX 1210 HARRISBURG, PA 17108-1210 City _____ <input checked="" type="checkbox"/> Return document by email to: penncorp@penncorp.net	Foreign Registration Statement DSCB:15-412 (7/1/2015)  412
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Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$250

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 412 (relating to foreign registration statement), the undersigned foreign association hereby states that:

1. The type of association is (check only one):

- | | | |
|---|--|---|
| <input type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Business Trust |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input checked="" type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership | |

2. The full and proper name of the foreign association as registered in its jurisdiction of formation is:

ImageVision.Net, LLC

2A. If the name in 2 does not contain a required designator or if the name in 2 is not available for use in the Commonwealth, the alternate name under which the association is registering in this Commonwealth is:

See attached Consent to Appropriation of Name

A resolution of the governors adopting the name in 2A for use in registering to do business in this Commonwealth must be attached.

3. The jurisdiction of formation is: Delaware

4. The street and mailing address of the association's principal office.

5010 Ritter Road Suite 101	Mechanicsburg	PA	17055
Number and street	City	State	Zip

4A. The street and mailing address of the office, if any, required to be maintained by the law of the association's jurisdiction of formation in that jurisdiction:

5010 Ritter Road Suite 101	Mechanicsburg	PA	17055
Number and street	City	State	Zip

5. The (a) address of the association's proposed registered office in this Commonwealth or (b) name of its Commercial Registered Office Provider and the county of venue is:

Complete part (a) OR (b) - not both:

(a) 5010 Ritter Road Suite 101 Mechanicsburg PA 17055 Cumberland
Number and street City State Zip County
OR

(b) c/o: _____
Name of Commercial Registered Office Provider County

6. Check one of the following:

- The association may not have series.
 The association may have one or more series.

7. Effective date of registration of foreign association (check, and if appropriate complete, one of the following):

- The Foreign Registration Statement shall be effective upon filing in the Department of State.
 The Foreign Registration Statement shall be effective on: 11/26/2015 at _____
Date (MM/DD/YYYY) Hour (if any)

8. To be completed by Limited Liability Companies only. Check, and if appropriate complete, one of the following:


- The association is a limited liability company which is not organized to render any of the below professional service(s).
 The association is a restricted professional limited liability company organized to render one or more of the following professional service(s): (If this box is checked, one or more of the fields below must be checked.)

___ Chiropractic ___ Dentistry ___ Law ___ Medicine and surgery
___ Optometry ___ Osteopathic medicine and surgery ___ Podiatric medicine ___ Public accounting
___ Psychology ___ Veterinary medicine

IN TESTIMONY WHEREOF, the undersigned association has caused this Foreign Registration Statement to be signed by a duly authorized representative thereof this 25 day of November, 2015.

ImageVision.Net, LLC
Name of Association
[Signature]
Signature
President
Title

**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

Consent to Appropriation of Name DSCB:19-17.2 (rev. 7/2015)	 19172
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Pursuant to 19 Pa. Code § 17.2 (relating to appropriation of the name of a senior corporation), the undersigned association, desiring to consent to the appropriation of its name by another association, hereby certifies that:

1. The name of the association executing this Consent to Appropriation of Name is:

ImageVision.Net, LLC

2. The (a) address of the consenting association's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

Complete part (a) OR (b) – not both:

(a) 5010 Ritter Road Suite 101	Mechanicsburg	PA	17055	Cumberland
Number and street	City	State	Zip	County
OR				

(b) c/o: _____
Name of Commercial Registered Office Provider County

3. The date of incorporation or other organization of the consenting association is: 03/31/2000

4. The association(s) entitled to the benefit of this Consent to Appropriation of Name is(are):
ImageVision.Net, LLC (Delaware LLC filing for foreign registration)

5. The consenting association is (check only one):

- About to change its name
- About to cease to do business
- Being wound up
- A foreign association about to withdraw from doing business in the Commonwealth

IN TESTIMONY WHEREOF, the undersigned association has caused this Consent to Appropriation of Name be signed by a duly authorized officer thereof this 25 day of November, 2015.



 Signature

President

 Title

Delaware


The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A PENNSYLVANIA CORPORATION UNDER THE NAME OF "IMAGEVISION.NET, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "IMAGEVISION.NET, INC." TO "IMAGEVISION.NET, LLC", FILED IN THIS OFFICE ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2015, AT 12:29 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE TWENTY-SIXTH DAY OF NOVEMBER, A.D. 2015 AT 12:01 O`CLOCK A.M.




Jeffrey W. Bullock, Secretary of State

5888407 8100F
SR# 20151082450

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 10495235
Date: 11-25-15

TRADEMARK
REEL: 005679 FRAME: 0009

**STATE OF DELAWARE
CERTIFICATE OF CONVERSION
FROM A NON-DELAWARE CORPORATION TO
A DELAWARE LIMITED LIABILITY COMPANY PURSUANT TO
SECTION 18-214 OF THE LIMITED LIABILITY ACT**

On this 25th day of November, 2015, pursuant to the provisions of Section 18-214 of the Delaware Limited Liability Company Act, IMAGEVISION.NET, INC. (the “Company”) does hereby certify that:

ARTICLE I

The jurisdiction where the Company first incorporated is Pennsylvania.

ARTICLE II

The jurisdiction immediately prior to filing this Certificate is Pennsylvania.

ARTICLE III

The date the Company first incorporated is December 13, 1996.

ARTICLE IV

The name of the Company immediately prior to filing this Certificate is “ImageVision.Net, Inc.”

ARTICLE V

The name of the Limited Liability Company as set forth in the Certificate of Formation is “ImageVision.Net, LLC”, as attached hereto.

ARTICLE VI

This Certificate of Conversion shall be effective 12:01 a.m. Eastern Time on November 26, 2015.

[Signature page follows]