

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM364451

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Wythe Will Tzetzco LLC		12/16/2013	LIMITED LIABILITY COMPANY: MARYLAND
RECEIVING PARTY DATA			
Name:	First Source, LLC		
Street Address:	3612 LaGrange Parkway		
City:	Toano		
State/Country:	VIRGINIA		
Postal Code:	23168		
Entity Type:	LIMITED LIABILITY COMPANY: MARYLAND		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	3040443	BASKET STUFFERS	
Registration Number:	3044857	BASKET STUFFERS	
CORRESPONDENCE DATA			
Fax Number:	3122691747		
<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:	312.269.8000		
Email:	temanuelson@ngelaw.com		
Correspondent Name:	Bradley F. Rademaker		
Address Line 1:	2 North LaSalle Street, Suite 1700		
Address Line 2:	Neal, Gerber & Eisenberg, LLP		
Address Line 4:	Chicago, ILLINOIS 60602		
ATTORNEY DOCKET NUMBER:	25746-7018		
NAME OF SUBMITTER:	Bradley F. Rademaker		
SIGNATURE:	/Bradley Rademaker/		
DATE SIGNED:	12/03/2015		
Total Attachments: 2			
source=WWT--Certified Copy - Articles of Amendment - Name Change to First Source (3)#page1.tif			
source=WWT--Certified Copy - Articles of Amendment - Name Change to First Source (3)#page2.tif			

CH \$65.00 3040443

ARTICLES OF AMENDMENT TO
ARTICLES OF ORGANIZATION
OF

WYTHE WILL TZETZO, LLC

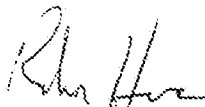
Wythe Will Tzetzto, LLC, a Maryland limited liability company (the "Company"), hereby certifies to the State Department of Assessments and Taxation of the State of Maryland that:

1. Article 1 of the Articles of Organization of the Company is hereby deleted in its entirety and the following inserted in lieu thereof:

1. The name of the limited liability company is First Source, LLC ✓

2. The aforesaid amendment to the Articles of Organization of the Company was approved by the sole member of the Company pursuant to the provisions of Section 4A-403 of the Maryland Limited Liability Company Act.

IN WITNESS WHEREOF, the undersigned authorized person of the Company has executed these Articles of Amendment to the Articles of Organization as of the 16 day of December 2013 on behalf of the Company and acknowledges these Articles of Amendment to the Articles of Organization to be the act of the Company.



Roderick Hogan
Authorized Person

CUST ID: 0003017368
WORK ORDER: 0004233948
DATE: 12-17-2013 12:14 PM
AMT. PAID: \$225.00

STATE OF MARYLAND

I hereby certify that this is a true and complete copy of the
page document of First Source, LLC DATED: 12/16/13

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

BY: Sharon S. Cooper Custodian

This stamp system is optional and does not constitute a signature. Effective 1/09

4851-6151-9127

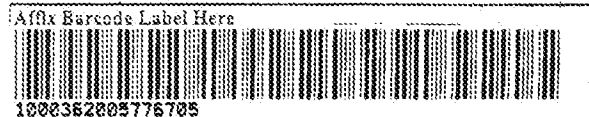
CORPORATE CHARTER APPROVAL SHEET

EXPEDITED SERVICE

** KEEP WITH DOCUMENT **

DOCUMENT CODE 41A BUSINESS CODE _____

W14094791



Class _____ Stock _____ Nonstock _____

P.A. _____ Religious _____

Merging (Transferor) _____

Affix Barcode Label Here
ID # W14094791 ACN # 1000362005776705
PAGES: 0002
FIRST SOURCE, LLC

Surviving (Transferee) _____

12/17/2013 AT 12:14 P WO # 0004233948

New Name First Source, LLC

FEES REMITTED

Base Fee:	_____	<u>100</u>
Org. & Cap. Fee:	_____	
Expedite Fee:	_____	<u>2</u>
Penalty:	_____	
State Recordation Tax:	_____	
State Transfer Tax:	_____	
Certified Copies:	_____	
Copy Fee:	_____	
Certificates:	_____	
Certificate of Status Fee:	_____	
Personal Property Filings:	_____	
Mail Processing Fee:	_____	
Other:	_____	
TOTAL FEES:	_____	<u>150</u>

<input checked="" type="checkbox"/>	Change of Name
<input type="checkbox"/>	Change of Principal Office
<input type="checkbox"/>	Change of Resident Agent
<input type="checkbox"/>	Change of Resident Agent Address
<input type="checkbox"/>	Resignation of Resident Agent
<input type="checkbox"/>	Designation of Resident Agent and Resident Agent's Address
<input type="checkbox"/>	Change of Business Code
<input type="checkbox"/>	Adoption of Assumed Name
<input type="checkbox"/>	Other Change(s)

Credit Card _____ Check Cash _____
Documents on _____ Checks

Code 045
PLEASE include name on acknowledgement
Attention: C. Johnson

Approved By: [Signature]

Mail Name and Address
MILES & STOCKBRIDGE
C. JOHNSON
100 LIGHT ST
BALTIMORE MD 21202-1036

Keyed By: _____

COMMENT(S)

Stamp Work Order and Customer Number HERE
 CUST ID: 0003017368
 WORK ORDER: 0004233948
 DATE: 12-17-2013 12:14 PM
 AMT. PAID: \$225.00