

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM374284

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Performance Rehabilitation of Western New England, P.C.		11/30/2015	Professional Corporation: MASSACHUSETTS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Performance Rehabilitation of Western New England, LLC		
<b>Street Address:</b>	168 Denslow Road		
<b>City:</b>	East Longmeadow		
<b>State/Country:</b>	MASSACHUSETTS		
<b>Postal Code:</b>	01028		
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: MASSACHUSETTS		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	3802681		
<b>Registration Number:</b>	3802683		
<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>Email:</b>	prosecutiondocketing@paulhastings.com		
<b>Correspondent Name:</b>	Paul Hastings LLP		
<b>Address Line 1:</b>	P.O. Box 919092		
<b>Address Line 4:</b>	San Diego, CALIFORNIA 92191-9092		
<b>ATTORNEY DOCKET NUMBER:</b>	77134.00054		
<b>NAME OF SUBMITTER:</b>	Laura C. Yip		
<b>SIGNATURE:</b>	/Laura C. Yip/		
<b>DATE SIGNED:</b>	02/23/2016		
<b>Total Attachments: 5</b>			
source=Performance Rehab of Western New England - Certificate of Conversion#page1.tif			
source=Performance Rehab of Western New England - Certificate of Conversion#page2.tif			
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**D  
PC**

**The Commonwealth of Massachusetts**

**William Francis Galvin**  
Secretary of the Commonwealth  
One Ashburton Place, Boston, Massachusetts 02108-1512

FORM MUST BE TYPED

**Articles of Entity Conversion of a  
Domestic Business Corporation to a  
Domestic Other Entity**

FORM MUST BE TYPED

(General Laws Chapter 156D, Section 9.53; 950 CMR 113.29)

(1) Exact name of corporation prior to conversion: Performance Rehabilitation of Western New England, P.C.

(2) Registered office address: 168 Denslow Road, East Longmeadow, Massachusetts 01028  
(number, street, city or town, state, zip code)

(3) New name after conversion, which shall satisfy the organic law of the surviving entity:  
Performance Rehabilitation of Western New England, LLC

(4) New type of entity: Limited liability company

(5) The plan of entity conversion was duly approved by the shareholders, and where required, by each separate voting group in the manner required by G.L. Chapter 156D and the articles of organization.

(6) Attach any additional sheets containing all information required to be set forth in the public organic document of the surviving entity.

(7) The conversion of the corporation shall be effective at the time and on the date approved by the Division, unless a later effective date is specified in accordance with the organic law of the surviving entity: \_\_\_\_\_

Signed by:  \_\_\_\_\_  
(signature of authorized individual)

(Please check appropriate box)

- Chairman of the board of directors,
- President,
- Other officer,
- Court-appointed fiduciary,

on this 30th day of November, 2015

**P**

**The Commonwealth of Massachusetts**

**William Francis Galvin**

Secretary of the Commonwealth

One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

**Professional Limited Liability Company**

**Certificate of Organization**

(General Laws Chapter 156C, Section 12)

Federal Identification No.: \_\_\_\_\_

(1) The exact name of the limited liability company:

**Performance Rehabilitation of Western New England, LLC**

(2) The street address of the office in the commonwealth at which its records will be maintained:

**168 Denslow Road, East Longmeadow, MA 01028**

(3a) The professional service to be rendered:

**Physical therapy and related services**

(3b) The name and address of each member or manager who will render a professional service in the Commonwealth, and attach a certificate of the applicable regulating board that each such member or manager who will render the service in the Commonwealth is duly licensed:

**James F. Biron**

**36 Willet Drive  
Longmeadow, MA 01106**

**Terry D. Ditmar**

**26 Canterbury Lane  
Longmeadow, MA 01106**

**MaryLynn Jacobs**

**36 Hallie Lane  
Somers, CT 06071**

(3c) The limited liability company agrees to abide by and be subject to any conditions or limitations established by any applicable regulating board including the provision of liability insurance required by G.L. c. 156C § 65.

(4) Latest date of dissolution, if specified: \_\_\_\_\_

(5) The name and street address, of the resident agent in the commonwealth:

NAME

ADDRESS

**James F. Biron**

**168 Denslow Road  
East Longmeadow, MA 01028**

(6) The name and business address, if different from office location, of each manager, if any, and if none, so state:

NAME ADDRESS

James F. Biron

Terry D. Ditmar

MaryLynn Jacobs

(7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:

NAME ADDRESS

(8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property recorded with a registry of deeds or district office of the land court:

NAME ADDRESS

James F. Biron

Terry D. Ditmar

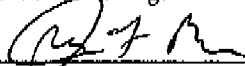
MaryLynn Jacobs

(9) Additional matters:

Signed by (by at least one authorized signatory):



Consent of resident agent:

I,  resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to G.L. c 156C § 12\*

\*or attach resident agent's consent hereto.

# The Commonwealth of Massachusetts

William Francis Galvin  
Secretary of the Commonwealth  
One Ashburton Place, Boston, Massachusetts 02108-1512

## Certificate by Regulatory Board

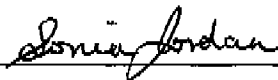
In compliance with General Laws, Chapter 156C/~~156A~~ the Board of Allied Health Professions hereby certifies  
*(name of board)*

that in connection with the formation/~~registration~~ of Performance Rehabilitation of Western New England, LLC  
*(name of company/partnership)*

a professional limited liability company/~~limited liability corporation~~ formed to render physical therapy services  
*(type of service)*

the below listed managers/~~partners~~ are duly licensed or admitted to practice the profession listed above.

Managers/ <del>Partners</del>	Addresses
James F. Biron	36 Willet Drive, Longmeadow, MA 01106
Terry D. Ditmar	28 Canterbury Lane, Longmeadow, MA 01106
MaryLynn Jacobs	36 Hallie Lane, Somers, CT 06071

Signed by:   
*(chairman/clerk of the regulatory board)*

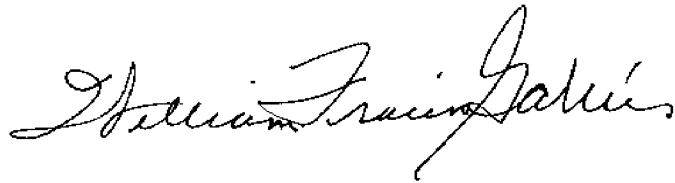
on this 18<sup>th</sup> day of November, 2015

Delete any inapplicable language.

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

November 30, 2015 11:20 AM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is written in a cursive style with a large, prominent initial "W".

WILLIAM FRANCIS GALVIN

*Secretary of the Commonwealth*