

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM373992

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	ENTITY CONVERSION
RESUBMIT DOCUMENT ID:	900351244

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
BEUTLICH PHARMACEUTICALS, LLC		12/30/2014	LIMITED LIABILITY COMPANY: ILLINOIS

RECEIVING PARTY DATA

Name:	BEUTLICH PHARMACEUTICALS, LLC
Street Address:	7775 S US Highway 1
Internal Address:	Suite H
City:	Bunnell
State/Country:	FLORIDA
Postal Code:	32110
Entity Type:	LIMITED LIABILITY COMPANY: FLORIDA

PROPERTY NUMBERS Total: 12

Property Type	Number	Word Mark
Registration Number:	0971198	HURRICANE
Registration Number:	1203345	PERIDIN-C
Registration Number:	2274852	HURRISEAL
Registration Number:	0752401	CEO-TWO
Registration Number:	2681848	HURRISEPT
Registration Number:	2853404	BEUTLICH
Registration Number:	2853403	BEUTLICH
Registration Number:	2859940	FSB
Registration Number:	2872775	HURRIVIEW
Registration Number:	3327336	HURRIVIEW II
Registration Number:	3541416	HURRIPAK
Registration Number:	3909045	HURRICANE ONE

CORRESPONDENCE DATA

Fax Number: 3128278185

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: 312-781-6013
Email: chicago.trademarks@klgates.com, kate.starshak@klgates.com,
valerie.swanson@klgates.com
Correspondent Name: Kathryn Starshak c/o K&L Gates LLP
Address Line 1: P.O. Box 1135
Address Line 4: Chicago, ILLINOIS 60690-1135

ATTORNEY DOCKET NUMBER: 3712117

NAME OF SUBMITTER: Kathryn Starshak

SIGNATURE: /kathryn starshak/

DATE SIGNED: 02/22/2016

Total Attachments: 9

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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Spreadsheet Version v1.2

ETAS ID: TM370039

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formality	Execution Date	Entity Type
BEUTLICH PHARMACEUTICALS, LLC		12/11/2014	LIMITED LIABILITY COMPANY, ILLINOIS
RECEIVING PARTY DATA			
Name:	BEUTLICH PHARMACEUTICALS, LLC		
Street Address:	7775 S US Highway 1		
Internal Address:	Suite H		
City:	Romeil		
State/Country:	FLORIDA		
Postal Code:	32110		
Entity Type:	LIMITED LIABILITY COMPANY, FLORIDA		
PROPERTY NUMBERS Total: 12			
Property Type	Number	Word Mark	
Registration Number:	0971198	HURRICANE	
Registration Number:	1293345	PERDRA-C	
Registration Number:	2974889	HURRSEAL	
Registration Number:	2782401	CEO-TWQ	
Registration Number:	2681648	HURRSEPT	
Registration Number:	2893404	BEUTLICH	
Registration Number:	2053403	BEUTLICH	
Registration Number:	2859940	FSE	
Registration Number:	2972779	HURRVIEW	
Registration Number:	2327336	HURRVIEW II	
Registration Number:	3541416	HURRPAK	
Registration Number:	3906046	HURRICANE ONE	
CORRESPONDENCE DATA			
Fax Number:	3126279165		
<i>Correspondence will be sent to the e-mail address listed; 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:	312-791-6013		
Email:	chicago.brandmarks@qipdes.com, wbs.starch@qipdes.com,		

CH 3315.00 03/11/06

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

The Articles of Conversion **and attached Articles of Organization** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Liability Company** in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Beutlich Pharmaceuticals, LLC M1400007445
(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability company.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Illinois
on 1/1/12 (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
Beutlich Pharmaceuticals, LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: _____.
(The effective date: **1**) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; **AND 2**) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

5. The plan of conversion has been approved in accordance with all applicable statutes.

FILED
2014 DEC 30 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 3 day of December 2014

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: *Erlene Thomas*
Printed Name: Erlene Thomas Title: Manager

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: *F. Jack Beutlich*
Printed Name: F. Jack Beutlich Title: Authorized Member

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

FILED
 2014 DEC 30 PM 4:05
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BEUTLICH PHARMACEUTICALS, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

228 Willow Oak Way
Palm Coast, FL 32137

228 Willow Oak Way
Palm Coast, FL 32137

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Erlene Thomas
Name

228 Willow Oak Way
Florida street address (P.O. Box NOT acceptable)

Palm Coast FL 32137
City Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..


Registered Agent's Signature (REQUIRED) *

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Erlene Thomas

228 Willow Oak Way

Palm Coast, FL 32137

AMBR

F. Jack Beutlich

228 Willow Oak Way

Palm Coast, FL 32137

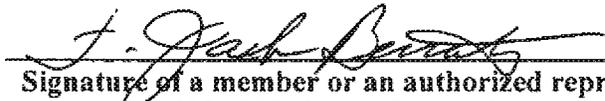
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

F. JACK BEUTLICH

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

2014 DEC 30 PM 4: 06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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For
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Into
Florida Limited Liability Company

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(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Illinois

(Enter state, or if a non-U.S. entity, the name of the country)

on 1/1/12
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

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(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: _____

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2014 DEC 30 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 3 day of December 2014.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: *Erlene Thomas*
Printed Name: Erlene Thomas Title: Manager

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: *F. Jack Beutlich*
Printed Name: F. Jack Beutlich Title: Authorized Member

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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Mailing Address:

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Palm Coast, FL 32137

228 Willow Oak Way
Palm Coast, FL 32137

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Florida street address (P.O. Box NOT acceptable)

Palm Coast FL 32137
City Zip

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Registered Agent's Signature (REQUIRED) *

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Page 1 of 2

2014 DEC 30 PM 4: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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