

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM382869

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Span-Alaska Transportation, Inc.		07/03/2014	Corporation: WASHINGTON
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Span-Alaska Transportation, LLC		
<b>Street Address:</b>	3815 W. Valley Hwy N		
<b>City:</b>	Auburn		
<b>State/Country:</b>	WASHINGTON		
<b>Postal Code:</b>	98001		
<b>Entity Type:</b>	Limited Liability Company: WASHINGTON		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4313536	SPAN HAWAII	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	3128622200		
<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>Phone:</b>	3128622000		
<b>Email:</b>	rob.soneson@kirkland.com		
<b>Correspondent Name:</b>	Rob Soneson		
<b>Address Line 1:</b>	300 N LaSalle		
<b>Address Line 2:</b>	Kirkland & Ellis LLP		
<b>Address Line 4:</b>	Chicago, ILLINOIS 60654		
<b>ATTORNEY DOCKET NUMBER:</b>	17553-2-RFS		
<b>NAME OF SUBMITTER:</b>	Rob Soneson		
<b>SIGNATURE:</b>	/rsoneson/		
<b>DATE SIGNED:</b>	05/03/2016		
<b>Total Attachments: 8</b>			
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Office of the Secretary of State  
Corporations & Charities Division

James M. Dolliver Building  
801 Capitol Way South • PO Box 40234  
Olympia, WA 98504-0234  
Tel: 360.725.0377  
[www.sos.wa.gov/corps](http://www.sos.wa.gov/corps)

**Congratulations:**

You have completed the initial filing to create a new business entity. **The next step in opening your new business is to complete a Business License Application.** You may have completed this step already. The Business License Application can be completed online or downloaded at: <http://www.bls.dor.wa.gov/>

If you have any questions about the Business License Application, or would like a Business License Application package mailed to you, please call the Department of Revenue at 1-800-451-7985.

If you have questions about report and registered agent requirements, please contact the Corporations Division at 360-725-0377 or visit our website at: <http://www.sos.wa.gov/corps>.

**IMPORTANT**

To keep your filing status active and avoid administrative dissolution, you must:

1. **File an Initial Report** within 120 days of the date your corporation or limited liability company (LLC) was filed. The date of filing is stated on your certificate. Please complete and return the enclosed Initial Report, together with the \$10 filing fee.
2. **File an Annual Report** and pay the annual license fee each year before the anniversary of the filing date for the entity. The registered agent will be sent notice of the Annual Report requirement. But it is the corporation or LLC's responsibility to file the report even if no notice is received.
3. **Maintain a Registered Agent** and registered office in this state. You must notify the Corporations Division if there are any changes in your registered agent, agent's address, or registered office address. Failure to notify the Corporations Division of changes will result in misrouted mail, and possibly administrative dissolution.

If you have questions about report and registered agent requirements, please contact the Corporations Division at 360-725-0377 or visit our website at: <http://www.sos.wa.gov/corps>.

NATIONAL REGISTERED AGENTS INC  
505 UNION AVE SE STE 120  
OLYMPIA, WA 98501

UNITED STATES OF AMERICA

The State of



Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

**CERTIFICATE OF CONVERSION**

to

**SPAN-ALASKA TRANSPORTATION, LLC**

a/an WA Limited Liability Company. Conversion documents are effective on the date indicated below.

Date: 7/3/2014

UBI Number: 600-427-461



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

A handwritten signature in cursive script that reads "Kim Wyman".

Kim Wyman, Secretary of State

Date Issued: 7/3/2014

TRADEMARK

REEL: 005784 FRAME: 0605



Office of the Secretary of State  
Corporations & Charities Division

**INITIAL REPORT**  
**FEE: \$10.00**

RETURN COMPLETED FORM AND PAYMENT TO:  
(Checks made payable to "Secretary of State")

801 Capitol Way South  
PO Box 40234  
Olympia, WA 98504-0234

Entity Name: SPAN-ALASKA TRANSPORTATION, LLC  
Payment Due By: 10/31/2014  
Unified Business Identifier: 600-427-461  
State of Incorporation: WA  
Inc./Qual. Date: 2/23/1978

TYPE OR PRINT ALL INFORMATION IN DARK INK

<p><b>Current Registered Agent/Office</b></p> <p>NATIONAL REGISTERED AGENTS INC 505 UNION AVE SE STE 120 OLYMPIA, WA 98501</p>	<p><b>Registered Agent/Office Changes</b> <i>(Changes must be approved by the Board of Directors)</i></p> <p>New Registered Agent Name _____</p> <p>Consent to Appointment _____ <i>Signature of New Registered Agent</i></p> <p>Required Street Address _____</p> <p>City _____ State WA Zip Code _____</p> <p>Optional Mailing Address _____</p> <p>City _____ State WA Zip Code _____</p>
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REPORT SECTION MUST BE FILLED IN COMPLETELY – DO NOT LEAVE SPACES BLANK

Principal place of business in WA  YES  NO \_\_\_\_\_ WA \_\_\_\_\_  
Address City Zip

Nature of Business \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Foreign Entities - Principal office address.

Address City State Zip Country

- CORPORATION:** Print or type names and addresses of ALL corporate officers and directors *(attach additional list if necessary)*.
- LLC:** Print or type names and addresses of Members or Managers *(attach additional list if necessary)*.

Name	Title	Address	City	State	Zip

SIGNATURE \_\_\_\_\_ Of governing person listed above Type or Print Name and Title Date

CORPORATIONS INFORMATION AND ASSISTANCE – 360/725-0377

Rev. 01-006 4/14

**TRADEMARK**  
**REEL: 005784 FRAME: 0606**

ARTICLES OF CONVERSION  
FROM A DOMESTIC CORPORATION TO  
A LIMITED LIABILITY COMPANY

FILED

JUL 03 2014

WA SECRETARY OF STATE

600 427 461

\*\*\*\*\*  
*In accordance with the provisions of  
Chapter 25.15 of the Revised Code of Washington*  
\*\*\*\*\*

The undersigned, being duly authorized to execute and file these Articles of Conversion from a Washington corporation to a Washington limited liability company for the purposes of converting Span-Alaska Transportation, Inc., a Washington corporation (the "Corporation"), into a Washington limited liability company (the "Limited Liability Company") pursuant to Chapter 25.15 of the Revised Code of Washington, does hereby certify as follows:

**FIRST:** The jurisdiction where the Corporation first formed is Washington.

**SECOND:** The jurisdiction of the Corporation immediately prior to filing these Articles of Conversion is Washington.

**THIRD:** The date the Corporation first formed is February 23, 1978.

**FOURTH:** The name of the Corporation immediately prior to filing these Articles of Conversion is Span-Alaska Transportation, Inc.

**FIFTH:** The name of the Limited Liability Company as set forth in the Certificate of Formation is Span-Alaska Transportation, LLC.

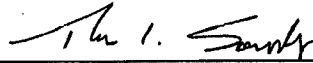
**SIXTH:** These Articles of Conversion and the conversion contemplated hereby were duly adopted by written consent of the Board of Directors of the Corporation and the sole Shareholder of the Corporation in accordance with the provisions of Section 23B.10.030 of the Washington Business Corporation Act and in accordance with the governing documents of the Corporation.

**SEVENTH:** These Articles of Conversion is to become effective upon their filing with the Secretary of State of the State of Washington.

The undersigned, being the duly authorized person, for the purposes of converting the the Corporation into a domestic limited liability company pursuant to Chapter 25.15 of the Revised Code of Washington, does make these Articles of Conversion, hereby declare and certify that this is my act and deed and the facts stated herein are true, and accordingly have hereunto set my hands on the 3rd day of July 2014.

SPAN-ALASKA TRANSPORTATION, INC.  
a Washington corporation

By: \_\_\_\_\_



Name: Thomas Souply

Title: Chief Executive Officer and President

**CERTIFICATE OF FORMATION  
OF  
SPAN-ALASKA TRANSPORTATION, LLC**

\* \* \* \* \*  
*In accordance with the provisions of  
Chapter 25.15 of the Revised Code of Washington*  
\* \* \* \* \*

The undersigned, being duly authorized to execute and file this Certificate of Formation for the purpose of forming a limited liability company pursuant to Chapter 25.15 of the Revised Code of Washington, hereby adopts the following Certificate of Formation:

**FIRST**

The name of the limited liability company is Span-Alaska Transportation, LLC (the "Company").

**SECOND**

The Company's registered office in the State of Washington is located at 505 Union Avenue SE, Suite 120, in the city of Olympia, County of Thurston, 98501. The registered agent of the Company for service of process at such address is National Registered Agents, Inc.

**THIRD**

The street address of the principal place of business of the Company is 3815 W. Valley Hwy N, Auburn, WA 98001.

**FOURTH**

The Company will be formed on the date this Certificate of Formation is filed with the Secretary of State of the State of Washington.

**FIFTH**

The Company is to have perpetual existence.

**SIXTH**

The management of the Company shall be vested in the member(s).

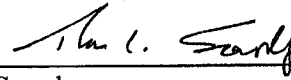
**SEVENTH**

The name and street address of each person executing this Certificate of Formation is as follows:

Thomas Souply  
2719 13th Street Place Southwest  
Puyallup, WA 98373



IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Formation as of the 3rd day of July 2014.



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Thomas Souply  
Authorized Person

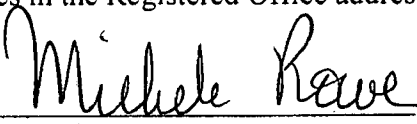
CONSENT TO SERVE AS REGISTERED AGENT

I, National Registered Agents, Inc., hereby Consent to serve as Registered Agent in the State of Washington, for the following:

Span-Alaska Transportation, LLC

I understand that as agent, it will be my responsibility to receive service of process; to forward all mail; and to immediately notify the Office of the Secretary of State in the event of my resignation, or of any changes in the Registered Office address.

7-3-14  
Date

  
Michele Rowe  
Michele Rowe  
Assistant Secretary