TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM394061

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
SEQUENCE:	1

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type	
FridaBaby, LLC		08/01/2016	Limited Liability Company: FLORIDA	

RECEIVING PARTY DATA

Name:	Snotsucker Seller Holdings, LLC			
Street Address:	31 NW 23rd Street			
City:	Miami			
State/Country: FLORIDA				
Postal Code:	33127			
Entity Type:	Limited Liability Company: FLORIDA			

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark
Serial Number:	86647745	THE FUSS STOPS HERE
Serial Number:	87118497	FRIDABABY

CORRESPONDENCE DATA

Fax Number: 3128622200

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: 3128628738

Email: michelle.nowicki@kirkland.com

Michelle Nowicki **Correspondent Name:** Address Line 1: 300 N. LaSalle Street Address Line 2: Kirkland & Ellis LLP

Address Line 4: Chicago, ILLINOIS 60654

ATTORNEY DOCKET NUMBER:	25497-1 MN
NAME OF SUBMITTER:	Michelle Nowicki
SIGNATURE:	/Michelle Nowicki/
DATE SIGNED:	08/08/2016

Total Attachments: 5

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source=Seller Holdings Name Change (FILED August 1 2016)_(42570102_2)#page2.tif source=Seller Holdings Name Change (FILED August 1 2016)_(42570102_2)#page3.tif source=Seller Holdings Name Change (FILED August 1 2016)_(42570102_2)#page4.tif source=Seller Holdings Name Change (FILED August 1 2016)_(42570102_2)#page5.tif



August 2, 2016

FLORIDA DEPARTMENT OF STATE Division of Corporations

SNOTSUCKER SELLER HOLDINGS, LLC 2760 NORTH BAY ROAD MIAMI BEACH, FL 33140

Re: Document Number L06000027400

The Articles of Amendment to the Articles of Organization for FRIDABABY, LLC which changed its name to SNOTSUCKER SELLER HOLDINGS, LLC, a Florida limited liability company, were filed on August 1, 2016.

The certification you requested is enclosed. To be official, the certification for a certified copy must be attached to the original document that was electronically submitted and filed under FAX audit number H16000183996.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Karen A Saly Regulatory Specialist II Division of Corporations

Letter Number: 716A00016125

P.O BOX 6327 - Tallahassee, Florida 32314



Bepartment of State

I certify the attached is a true and correct copy of Articles of Amendment, filed on August 1, 2016, to the Articles of Organization for FRIDABABY, LLC which changed its name to SNOTSUCKER SELLER HOLDINGS, LLC, a Florida limited liability company, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number H16000183996. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below

The document number of this limited liability company is L06000027400.

Authentication Code: 716A00016125-080216-L06000027400-1/1



Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Second day of August, 2016

> Ken Detzner Secretary of State

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fridababy			
(Name of the Limited Liability Company : (A Florida Limited Liab	as it now appears on our ility Company)	r records.)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L06000027400</u> .			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	y company here:		
Snotsucker Seller Holdings, LLC			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation	on "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
-			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office	e address on our	records, enter	the name of the new
registered agent and/or the new registered office address here:			,
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stre	at addrava	
•	ismer I torrau so e		
	City .	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office as company has been notified in writing of this change.	rformance of my du vided for in Chapte	ties, and I am for r 605, F.S. Or,	miliar with and if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
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Dated July	29			2016					
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Filing Fee: \$25.00

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