

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM433584

<b>SUBMISSION TYPE:</b>	RESUBMISSION		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>RESUBMIT DOCUMENT ID:</b>	900410192		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Rice's Lucky Clover Honey LLC		08/12/2015	Limited Liability Company: COLORADO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Rice's Lucky Clover Honey Inc.		
<b>Street Address:</b>	3331 West 29th Street		
<b>City:</b>	Greeley		
<b>State/Country:</b>	COLORADO		
<b>Postal Code:</b>	80631		
<b>Entity Type:</b>	Corporation: COLORADO		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4907979	L.R. RICE	
<b>Registration Number:</b>	4931414	RICE FAMILY HONEY	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	2149224142		
<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>	2149224119		
<b>Email:</b>	nward@hallettperrin.com		
<b>Correspondent Name:</b>	Nadine Ward		
<b>Address Line 1:</b>	1445 Ross Avenue		
<b>Address Line 2:</b>	Suite 2400		
<b>Address Line 4:</b>	Dallas, TEXAS 75202		
<b>NAME OF SUBMITTER:</b>	Bruce H. Hallett		
<b>SIGNATURE:</b>	/bruce h. hallett/		
<b>DATE SIGNED:</b>	07/02/2017		
<b>Total Attachments: 6</b>			
source=RLCH Statement of Conversion - with signature#page1.tif			
source=RLCH Statement of Conversion - with signature#page2.tif			

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source=RLCH Statement of Conversion - with signature#page5.tif  
source=RLCH Statement of Conversion - with signature#page6.tif



Colorado Secretary of State  
 Date and Time: 08/12/2015 10:39 AM  
 ID Number: 20001255047  
 Document number: 20151519427  
 Amount Paid: \$100.00

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**Statement of Conversion**

filed pursuant to § 7-90-201.7 (3) of the Colorado Revised Statutes (C.R.S.)

1. For the converting entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID number 20001255047  
*(Colorado Secretary of State ID number)*

Entity name or true name RICE'S LUCKY CLOVER HONEY LLC

Form of entity Limited Liability Company

Jurisdiction Colorado

Street address 3331 west 29th street  
*(Street number and name)*

GREELEY CO 80631  
*(City) (State) (ZIP/Postal Code)*

United States  
*(Province – if applicable) (Country)*

Mailing address \_\_\_\_\_  
 (leave blank if same as street address) *(Street number and name or Post Office Box information)*

\_\_\_\_\_ *(City) (State) (ZIP/Postal Code)*

\_\_\_\_\_ *(Province – if applicable) (Country)*

2. The entity name of the resulting entity is RICE'S LUCKY CLOVER HONEY LLC  
*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*
3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.
4. *(If applicable, adopt the following statement by marking the box and include an attachment.)*  
 This document contains additional information as provided by law.
5. *(Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)*  
*(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)*  
 The delayed effective date and, if applicable, time of this document are \_\_\_\_\_  
*(mm/dd/yyyy hour:minute am/pm)*

Notice:  
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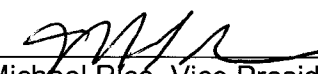
<u>Rice</u>	<u>Michael</u>		
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>1808 Sea Shell Court</u>			
<small>(Street number and name or Post Office Box information)</small>			
<hr/>			
<u>Windsor</u>	<u>CO</u>	<u>80550</u>	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
<u>United States</u>			
<small>(Province - if applicable)</small>		<small>(Country)</small>	

*(If applicable, adopt the following statement by marking the box and include an attachment.)*

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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Rice's Lucky Clover Honey, LLC
By <u></u>
Michael Rice, Authorized Agent
Rice's Lucky Clover Honey, Inc.
By <u></u>
Michael Rice, Vice President



Colorado Secretary of State  
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**Articles of Incorporation for a Profit Corporation**  
 filed pursuant to § 7-102-101 and § 7-102-102 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name for the corporation is

RICE'S LUCKY CLOVER HONEY LLC

*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

2. The principal office address of the corporation's initial principal office is

Street address

3331 West 29th Street

*(Street number and name)*

GREELEY

*(City)*

CO

*(State)*

80631

*(ZIP/Postal Code)*

United States

*(Country)*

*(Province - if applicable)*

Mailing address

*(leave blank if same as street address)*

*(Street number and name or Post Office Box information)*

*(City)*

*(State)*

*(ZIP/Postal Code)*

*(Province - if applicable)*

*(Country)*

3. The registered agent name and registered agent address of the corporation's initial registered agent are

Name

*(if an individual)*

Rice

*(Last)*

James

*(First)*

W

*(Middle)*

*(Suffix)*

or

*(if an entity)*

*(Caution: Do not provide both an individual and an entity name.)*

Street address

3331 West 29th Street

*(Street number and name)*

GREELEY

*(City)*

CO

*(State)*

80631

*(ZIP/Postal Code)*

Mailing address

*(leave blank if same as street address)*

*(Street number and name or Post Office Box information)*

*(City)*

*(State)*

*(ZIP/Postal Code)*

(The following statement is adopted by marking the box.)

The person appointed as registered agent above has consented to being so appointed.

4. The true name and mailing address of the incorporator are

Name  
(if an individual) \_\_\_\_\_  
(Last) (First) (Middle) (Suffix)

or

(if an entity) Rice's Lucky Clover Honey, LLC  
(Caution: Do not provide both an individual and an entity name.)

Mailing address 3331 West 29th Street  
(Street number and name or Post Office Box information)

Greeley CO 80631  
(City) (State) (ZIP/Postal Code)  
United States  
(Province - if applicable) (Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

The corporation has one or more additional incorporators and the name and mailing address of each additional incorporator are stated in an attachment.

5. The classes of shares and number of shares of each class that the corporation is authorized to issue are as follows.

- The corporation is authorized to issue 100 common shares that shall have unlimited voting rights and are entitled to receive the net assets of the corporation upon dissolution.
- Information regarding shares as required by section 7-106-101, C.R.S., is included in an attachment.

6. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

7. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are \_\_\_\_\_  
(mm/dd/yyyy hour:minute am/pm)

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8. The true name and mailing address of the individual causing the document to be delivered for filing are

Rice Michael  
*(Last) (First) (Middle) (Suffix)*  
1808 Sea Shell Court  
*(Street number and name or Post Office Box information)*  
Windsor CO 80550  
*(City) (State) (ZIP/Postal Code)*  
United States  
*(Province - if applicable) (Country)*

*(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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