

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM450060

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Brain Matters Research, Inc.		10/23/2017	Corporation: FLORIDA
RECEIVING PARTY DATA			
Name:	Brain Matters Research, LLC		
Street Address:	5109 C North Ocean Blvd.		
City:	Ocean Ridge		
State/Country:	FLORIDA		
Postal Code:	33435		
Entity Type:	Limited Liability Company: FLORIDA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	4776016	BRAIN MATTERS RESEARCH	
CORRESPONDENCE DATA			
Fax Number:	6142243246		
<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>			
Phone:	(614) 462-1055		
Email:	ipdocketcolumbus@icemiller.com		
Correspondent Name:	Roger A. Gilcrest - Ice Miller LLP		
Address Line 1:	250 West Street, Suite 700		
Address Line 4:	Columbus, OHIO 43215-7509		
NAME OF SUBMITTER:	Roger A. Gilcrest		
SIGNATURE:	/Roger A. Gilcrest/		
DATE SIGNED:	11/07/2017		
Total Attachments: 6			
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OP \$40.00 4776016

State of Florida



Department of State

I certify from the records of this office that BRAIN MATTERS RESEARCH, LLC, is a limited liability company organized under the laws of the State of Florida, filed on October 23, 2017, with an organizational date deemed effective September 20, 2004.

The document number of this company is L17000219770.

I further certify that said company has paid all fees due this office through December 31, 2017, and its status is active.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Twenty-fourth day of October, 2017



CR2EO22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State

TRADEMARK

REEL: 006199 FRAME: 0088

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BRAIN MATTERS RESEARCH, LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

LYNN D. BRODY
(Contact Person)

(Firm/Company)

5109 C NORTH OCEAN BLVD
(Address)

OCEAN RIDGE, FL 33435
(City, State and Zip Code)

LBRODY@BRAINMATTERSRESEARCH.COM
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

LYNN D. BRODY at (561) 702-0257
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

- \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)
- \$155.00 Filing Fees and Certificate of Status
- \$180.00 Filing Fees and Certified Copy
- \$185.00 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
DIVISION OF STATE
TALLAHASSEE, FLORIDA
17 OCT 23 PM 12:33

INHS11 (7/17)

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:
BRAIN MATTERS RESEARCH, INC.

(Enter Name of Other Business Entity)

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

First organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on SEPTEMBER 20, 2004
(date of organization, formation or incorporation)

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

BRAIN MATTERS RESEARCH, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: _____
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

FILED
MAY 17 2004
17 OCT 23 PM 12:33
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BRAIN MATTERS RESEARCH, LLC

(Must contain the words "Limited Liability Company," "LLC," 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:

800 NW 17TH AVENUE
DELRAY BEACH, FL 33445

5109 C NORTH OCEAN BLVD
OCEAN RIDGE, FL 33435

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:

LYNND. BRODY

Name

5109 C NORTH OCEAN BLVD

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

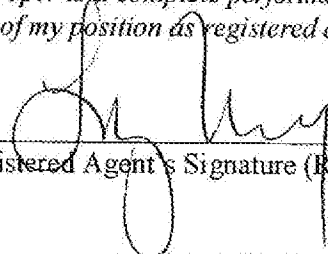
OCEAN RIDGE

FL 33435

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)

FILED
STATE
17 OCT 23 PM 12:33
TALLAHASSEE, FLORIDA

Signed this 20TH day of OCTOBER 20 17

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: LYNN D. BRODY Title: MANAGER

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

Signature: [Signature]
Printed Name: LYNN BRODY, DMBA Title: VICE PRESIDENT

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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)

17 OCT 23 PM 12:33
STATE
HALL
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:

MARK BRODY

5109 C NORTH OCEAN BLVD

OCEAN RIDGE FL 33435

MGR

LYNN D. BRODY

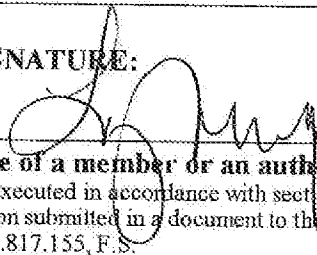
5109 C NORTH OCEAN BLVD

OCEAN RIDGE FL 33435

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

LYNN D. BRODY

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)

17 OCT 23 PM 12:33
DEPARTMENT OF STATE
TALLAHASSEE FL 32304

TRADEMARK