

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM457031

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
MedSave USA, Inc.		12/20/2017	Corporation: FLORIDA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	MedSave USA, LLC		
<b>Street Address:</b>	49 Wireless Boulevard, Suite 140		
<b>City:</b>	Hauppauge		
<b>State/Country:</b>	NEW YORK		
<b>Postal Code:</b>	11788		
<b>Entity Type:</b>	Limited Liability Company: FLORIDA		
<b>PROPERTY NUMBERS Total: 11</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5058647		
<b>Registration Number:</b>	5091846	ARROHEALTH	
<b>Registration Number:</b>	5059492	AGGREGATIONIQ	
<b>Serial Number:</b>	87324068	ARROADVANTAGE	
<b>Serial Number:</b>	87324078	ARROAGGREGATION	
<b>Serial Number:</b>	87324074	ARROANALYTICS	
<b>Serial Number:</b>	87324082	ARROCARE	
<b>Serial Number:</b>	87324085	ARROELEMENTS	
<b>Serial Number:</b>	87324094	ARROINSIGHT	
<b>Serial Number:</b>	87324107	ARROOUTREACH	
<b>Serial Number:</b>	87569130	ARROINTELLIGENCE	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	6172359493		
<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>	617-951-7790		
<b>Email:</b>	ronald.duvernay@ropesgray.com		
<b>Correspondent Name:</b>	Ronald M. Duvernay		
<b>Address Line 1:</b>	Prudential Tower, 800 Boylston Street		
<b>Address Line 4:</b>	Boston, MASSACHUSETTS 02199-3600		

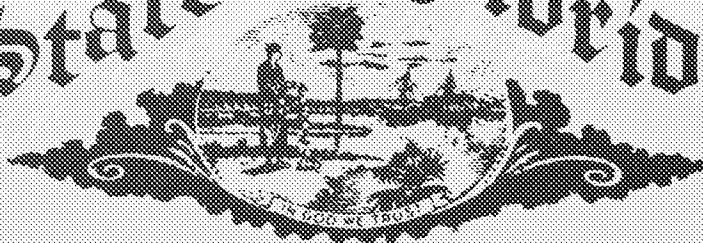
CH \$290.00 5058647

<b>ATTORNEY DOCKET NUMBER:</b>	112649-0022
<b>NAME OF SUBMITTER:</b>	Ronald M. Duvernay
<b>SIGNATURE:</b>	/r duvernay/
<b>DATE SIGNED:</b>	01/05/2018

**Total Attachments: 6**

source=MedSave USA LLC FL Certificate of Conversion#page1.tif  
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source=MedSave USA LLC FL Certificate of Conversion#page4.tif  
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source=MedSave USA LLC FL Certificate of Conversion#page6.tif

# State of Florida



## Department of State

I certify the attached is a true and correct copy of the Articles of Conversion, and Articles of Organization, filed on December 20, 2017, with an organizational date deemed effective March 28, 2002, for MEDSAVE USA, LLC, the resulting Florida Limited Liability Company, as shown by the records of this office.

The document number of this entity is L17000259885.

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



CR2ED22 (1-11)

*Ken Detzner*

Ken Detzner  
Secretary of State

TRADEMARK

REEL: 006244 FRAME: 0230



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 22, 2017

CT CORP

Re: Document Number L17000259885

The Articles of Conversion, and Articles of Organization were filed December 20, 2017, with an organizational date deemed effective March 28, 2002, for MEDSAVE USA, LLC, the resulting Florida Limited Liability Company.

The certification you requested is enclosed.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added. **It is your responsibility to remember to file your annual report in a timely manner.**

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Contact the IRS at 1-800-829-4933 for an SS-4 form or go to [www.irs.gov](http://www.irs.gov).

Should you have any further questions concerning this matter, please feel free to call (850) 245-6051, the Registration Filing Section.

Matthew T Moon  
Regulatory Specialist II  
Division of Corporations

Letter Number: 417A00025883

Account number: I20160000072

Amount charged: 180.00

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32309

**TRADEMARK**  
**REEL: 006244 FRAME: 0231**

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:  
MedSave USA, 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 March 28, 2002  
(date of organization, formation or incorporation)

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

MedSave USA, 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.

17 DEC 20 AM 0:30

Signed this 20th day of December 2017

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: *Lori Reel*  
Printed Name: Lori Reel Title: Chief Accounting Officer and Assistant Secretary

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

Signature: *Lori Reel*  
Printed Name: Lori Reel Title: Chief Accounting Officer and Assistant Secretary

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 DEC 20 AM 8:51

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

MedSave USA, LLC

(Must contain 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:**

49 Wireless Boulevard, Suite 140  
Hauppauge, New York 11788

**Mailing Address:**

49 Wireless Boulevard, Suite 140  
Hauppauge, New York 11788

**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:

CT Corporation System

Name

1200 South Pine Island Road

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

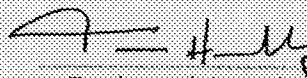
Plantation

City

FL 33324

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.*

 Terence Hardley Asst. Secretary  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

Title:

"AMBR" = Authorized Member  
"MGR" = Manager  
AMBR

Name and Address:

MedSave Holdings, Inc.  
49 Wireless Boulevard, Suite 140  
Hauppauge, New York 11788

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

REQUIRED SIGNATURE:

*Lori Reel*

**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.

Lori Reel, Chief Accounting Officer and Assistant Secretary of Medsave Holdings, Inc.

Typed or printed name of signer

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 DEC 20 AM 10:34