

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM462064

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT		
NATURE OF CONVEYANCE:	Corrective Assignment to correct the Entity type for the receiving party previously recorded on Reel 006137 Frame 0546. Assignor(s) hereby confirms the Change of Name.		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Catamaran PBM of Pennsylvania, Inc.		02/01/2016	Corporation: DELAWARE
RECEIVING PARTY DATA			
Name:	OptumRx PBM of Pennsylvania, LLC		
Street Address:	116 Pine Street		
Internal Address:	Suite 320		
City:	Harrisburg		
State/Country:	PENNSYLVANIA		
Postal Code:	17101		
Entity Type:	Limited Liability Company: PENNSYLVANIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Serial Number:	78866255	FUTURE SCRIPTS	
CORRESPONDENCE DATA			
Fax Number:	<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:	3124606596		
Email:	jfischer@seyfarth.com		
Correspondent Name:	Jason Fischer		
Address Line 1:	233 South Wacker Drive, Suite 8000		
Address Line 4:	Chicago, ILLINOIS 60606		
NAME OF SUBMITTER:	Jason Fischer		
SIGNATURE:	/JCF/		
DATE SIGNED:	02/14/2018		
Total Attachments: 5			
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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM440565

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Catamaran PBM of Pennsylvania, Inc.		02/01/2016	Corporation: DELAWARE
RECEIVING PARTY DATA			
Name:	OptumRx PBM of Pennsylvania, LLC		
Street Address:	116 Pine Street		
Internal Address:	Suite 320		
City:	Harrisburg		
State/Country:	PENNSYLVANIA		
Postal Code:	17101		
Entity Type:	Corporation: PENNSYLVANIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Serial Number:	78866255	FUTURE SCRIPTS	
CORRESPONDENCE DATA			
Fax Number:	3102015219		
<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:	310-201-9339		
Email:	chiipdocket@seyfarth.com		
Correspondent Name:	Amy A. Abeloff		
Address Line 1:	2029 Century Park East		
Address Line 2:	Suite 3500		
Address Line 4:	Los Angeles, CALIFORNIA 90067		
ATTORNEY DOCKET NUMBER:	023845-9061		
NAME OF SUBMITTER:	Amy A. Abeloff		
SIGNATURE:	/Amy A. Abeloff/		
DATE SIGNED:	08/24/2017		
Total Attachments: 3			
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CH \$40.00 78866255

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

04/17/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

OptumRx PBM of Pennsylvania, LLC.

I, Pedro A. Cortés, Secretary of the Commonwealth of Pennsylvania, do hereby certify that the foregoing and annexed is a true and correct copy of

Amendment filed on Jan 19, 2016 Effective Feb 1, 2016 - Pages (2)

which appear of record in this department.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Pedro A. Cortés

Secretary of the Commonwealth


Certification Number: TSC170417120991-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>

TRADEMARK
REEL: 006232 FRAME: 0668

Entity# : 592804
Date Filed : 01/19/2016
Effective Date : 02/01/2016
Pedro A. Cortés
Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

CT - COUNTER 9847433 SOPA 11	Certificate of Amendment - Domestic Limited Partnership/Limited Liability Company  TCO160119JM0781
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Read all instructions prior to completing. This form may b

Fee: \$70

Check one: Limited Partnership (§ 8512) Limited Liability Company (§ 8951)

In compliance with the requirements of the applicable provisions (relating to certificate of amendment), the undersigned, desiring to amend its Certificate of Limited Partnership/Organization, hereby certifies that:

1. The name of the limited partnership/limited liability company is:

Catamaran PBM of Pennsylvania, LLC

2. The date of filing of the original Certificate of Limited Partnership/Organization: 04/05/2006

Date (MM/DD/YYYY)

3. Check, and if appropriate complete, one of the following:

The amendment adopted by the limited partnership/limited liability company, set forth in full, is as follows:

The name of the limited liability company is OptumRx PBM of Pennsylvania, LLC

The amendment adopted by the limited partnership/limited liability company is set forth in full in Exhibit A attached hereto and made a part hereof.

4. Check, and if appropriate complete, one of the following:

The amendment shall be effective upon filing this Certificate of Amendment in the Department of State.

The amendment shall be effective on: 02/01/2016 at _____
Date (MM/DD/YYYY) Hour (if any)

2016 JAN 19 AM 9:46

PA064 - 07/01/2015 Wolters Kluwer Online

COMM OF PA
DEPT OF STATE

TRADEMARK
REEL: 006232 FRAME: 0669

DSCB:15-8512/8951-2

5. Check if the amendment restates the Certificate of Limited Partnership/Organization:

The restated Certificate of Limited Partnership/Organization supersedes the original Certificate of Limited Partnership/Organization and all previous amendments thereto.

IN TESTIMONY WHEREOF, the undersigned limited partnership/limited liability company has caused this Certificate of Amendment to be executed this

7th day of January, 2016.

Catamaran PBM of Pennsylvania, LLC

Name of Limited Partnership/Limited Liability Company


Signature

Jeffrey G. Park, CFO, EVP Finance, Secretary

Title