

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM472129

<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>
The Mark Travel Corporation		04/27/2018	Corporation: NEVADA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	The Mark Travel Company, LLC		
<b>Street Address:</b>	8907 North Port Washington Road		
<b>City:</b>	Milwaukee		
<b>State/Country:</b>	WISCONSIN		
<b>Postal Code:</b>	53217		
<b>Entity Type:</b>	Limited Liability Company: NEVADA		
<b>PROPERTY NUMBERS Total: 32</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	2345036	BLUE SKY TOURS	
<b>Registration Number:</b>	3059088	DISCOUNT VACATIONS	
<b>Registration Number:</b>	3441904	DO SOMETHING YOU'LL NEVER FORGET	
<b>Registration Number:</b>	1104487	FLORIDA FUNJET	
<b>Registration Number:</b>	1258871	FUNJET	
<b>Registration Number:</b>	2106617	FUNJET EXPRESS	
<b>Registration Number:</b>	2115459	FUNJET EXPRESS	
<b>Registration Number:</b>	1936065	FUNJET VACATIONS	
<b>Registration Number:</b>	2368935		
<b>Registration Number:</b>	2788732	FUNJET VACATION	
<b>Registration Number:</b>	1804816	FUNJET...THE FUNWAY TO GET AWAY!	
<b>Registration Number:</b>	2469899	FUNNET	
<b>Registration Number:</b>	1053430	FUNWAY HOLIDAYS	
<b>Registration Number:</b>	1455774	FUNWAY HOLIDAYS FUNJET	
<b>Registration Number:</b>	1060991	GREAT AMERICAN CITIES	
<b>Registration Number:</b>	4878629	HERE & BEYOND	
<b>Registration Number:</b>	2328628	HMHF FUN VACATIONS!	
<b>Registration Number:</b>	3353160	IMAGINE VACATIONS	
<b>Registration Number:</b>	1137030	LAS VEGAS FUNJET	

CH \$815.00 2345036

Property Type	Number	Word Mark
Registration Number:	3046898	MARK INTERNATIONAL
Registration Number:	2189748	MOUNTAIN VACATIONS
Registration Number:	2235103	PLEASURE BREAK VACATIONS
Registration Number:	2189975	PLEASURE BREAK VACATIONS
Registration Number:	2184765	SPORTS VENTURES
Registration Number:	1447922	THE MARK OF EXCELLENCE
Registration Number:	2241192	THE MARK TRAVEL CORPORATION
Registration Number:	1436738	TNT
Registration Number:	2011164	TNT VACATIONS
Registration Number:	4161085	TNT VACATIONS COM
Registration Number:	2321129	VACATION SAVERS
Registration Number:	2466609	VAX VACATION ACCESS
Registration Number:	2073325	WARM FACES FUN PLACES

**CORRESPONDENCE DATA**

**Fax Number:** 4142735198

*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:** 4142733500

**Email:** bgilpin@gklaw.com

**Correspondent Name:** Brian G. Gilpin

**Address Line 1:** 833 East Michigan Street, Suite 1800

**Address Line 2:** Godfrey & Kahn, S.C.

**Address Line 4:** Milwaukee, WISCONSIN 53202-5615

**ATTORNEY DOCKET NUMBER:** 002092-0306

**NAME OF SUBMITTER:** Brian G. Gilpin

**SIGNATURE:** /brian g. gilpin/

**DATE SIGNED:** 05/01/2018

**Total Attachments: 8**

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BARBARA K. CEGAVSKE  
 Secretary of State  
 202 North Carson Street  
 Carson City, Nevada 89701-4201  
 (775) 684-5708  
 Website: www.nvsos.gov



\*140304\*

**Articles of Conversion**  
 (PURSUANT TO NRS 92A.205)  
 Page 1

Filed in the office of <i>Barbara K. Cegavske</i>	Document Number <b>20180190372-93</b>
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time <b>04/27/2018 10:33 AM</b>
	Entity Number <b>C2427-1983</b>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

PLEASE NOTE: The charter document for the resulting entity *must* be submitted/filed simultaneously with the articles of conversion.

**Articles of Conversion**  
 (Pursuant to NRS 92A.205)

**1. Name and jurisdiction of organization of constituent entity and resulting entity:**

The Mark Travel Corporation

Name of constituent entity

Nevada

Jurisdiction

Corporation

Entity type \*

and.

The Mark Travel Company, LLC

Name of resulting entity

Nevada

Jurisdiction

Limited Liability Company

Entity type \*

**2. A plan of conversion has been adopted by the constituent entity in compliance with the law of the jurisdiction governing the constituent entity.**

**3. Location of plan of conversion: (check one)**

The entire plan of conversion is attached to these articles.

The complete executed plan of conversion is on file at the registered office or principal place of business of the resulting entity.

The complete executed plan of conversion for the resulting domestic limited partnership is on file at the records office required by NRS 88.330.

\* corporation, limited partnership, limited-liability limited partnership, limited-liability company or business trust .

This form must be accompanied by appropriate fees.

Nevada Secretary of State 92A Conversion Page 1  
 Revised: 1-5-15

**TRADEMARK**  
**REEL: 006324 FRAME: 0123**



**BARBARA K. CEGAVSKE**  
 Secretary of State  
 202 North Carson Street  
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**Articles of Conversion**  
 (PURSUANT TO NRS 92A.205)  
**Page 2**

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**4. Forwarding address where copies of process may be sent by the Secretary of State of Nevada (if a foreign entity is the resulting entity in the conversion):**

Attn: \_\_\_\_\_  
 c/o: \_\_\_\_\_

**5. Effective date and time of filing: (optional) (must not be later than 90 days after the certificate is filed)**

Date: 04/30/2018 Time: 0:01 am

**6. Signatures - must be signed by:**

1. If constituent entity is a Nevada entity: an officer of each Nevada corporation; all general partners of each Nevada limited partnership or limited-liability limited partnership; a manager of each Nevada limited-liability company with managers or one member if there are no managers; a trustee of each Nevada business trust; a managing partner of a Nevada limited-liability partnership (a.k.a. general partnership governed by NRS chapter 87).
2. If constituent entity is a foreign entity: must be signed by the constituent entity in the manner provided by the law governing it.

The Mark Travel Corporation  
 Name of constituent entity

X *William J. DeMarchia* President  
 Signature Title

04/27/2018  
 Date

\* Pursuant to NRS 92A.205(4) if the conversion takes effect on a later date specified in the articles of conversion pursuant to NRS 92A.240, the constituent document filed with the Secretary of State pursuant to paragraph (b) subsection 1 must state the name and the jurisdiction of the constituent entity and that the existence of the resulting entity does not begin until the later date. This statement must be included within the resulting entity's articles.

**FILING FEE: \$350.00**

**IMPORTANT:** Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected.

*This form must be accompanied by appropriate fees.*

Nevada Secretary of State 92A Conversion Page 2  
 Revised: 1-5-15



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\*050106\*

**Articles of Organization  
 Limited-Liability Company  
 (PURSUANT TO NRS CHAPTER 86)**

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number <b>20180190373-04</b> Filing Date and Time <b>04/27/2018 10:33 AM</b> Entity Number <b>C2427-1983</b>
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USE BLACK INK ONLY - DO NOT HIGHLIGHT

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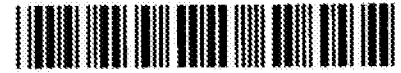
<b>1. Name of Limited-Liability Company:</b> (must contain approved limited-liability company wording; see instructions)	THE MARK TRAVEL COMPANY, LLC	Check box if a Series Limited-Liability Company <input type="checkbox"/>	Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: The Corporation Trust Company of Nevada Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity 701 S. Carson St., Ste. 200 Carson City Nevada 89701 Street Address City State Zip Code Mailing Address (if different from street address) City State Zip Code		
<b>3. Dissolution Date:</b> (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):		
<b>4. Management:</b> (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) <b>OR</b> <input checked="" type="checkbox"/> Member(s) (check only one box)		
<b>5. Name and Address of each Manager or Managing Member:</b> (attach additional page if more than 3)	1) La Macchia Enterprises, Inc. Name 8907 North Port Washington Road Milwaukee WI 53217 Street Address City State Zip Code 2) Name Street Address City State Zip Code 3) Name Street Address City State Zip Code		
<b>6. Name, Address and Signature of Organizer:</b> (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. William E. La Macchia Name 8907 North Port Washington Road Milwaukee WI 53217 Address City State Zip Code Organizer Signature		
<b>7. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Organization, submit a separate signed Registered Agent Acceptance form. <input checked="" type="checkbox"/> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 86 DLLC  
 Articles Revised: 9-26-17



BARBARA K. CEGAUSKE  
 Secretary of State  
 202 North Carson Street  
 Carson City, Nevada 89701-4201  
 (775) 684-5708  
 Website: www.nvsos.gov



\*180304\*

## Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

This form may be submitted by: a Commercial Registered Agent, Noncommercial Registered Agent or Represented Entity. For more information please visit <http://www.nvsos.gov/index.aspx?page=141>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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### Certificate of Acceptance of Appointment by Registered Agent

In the matter of THE MARK TRAVEL COMPANY, LLC  
 Name of Represented Business Entity

I, The Corporation Trust Company of Nevada am a:  
 Name of Appointed Registered Agent OR Represented Entity Serving as Own Agent\*

(complete only one)

- a)  commercial registered agent listed with the Nevada Secretary of State,
- b)  noncommercial registered agent with the following address for service of process:

701 S. Carson St., Ste. 200 Carson City Nevada 89701  
 Street Address City Zip Code

Nevada   
 Mailing Address (if different from street address) City Zip Code

- c)  represented entity accepting own service of process at the following address:

Title of Office or Position of Person in Represented Entity

Nevada   
 Street Address City Zip Code

Nevada   
 Mailing Address (if different from street address) City Zip Code

and hereby state that on 04/24/2018 I accepted the appointment as registered agent for  
 the above named business entity. Date

X Stephanie Henry  
 Authorized Signature of R.A. or On Behalf of R.A. Company

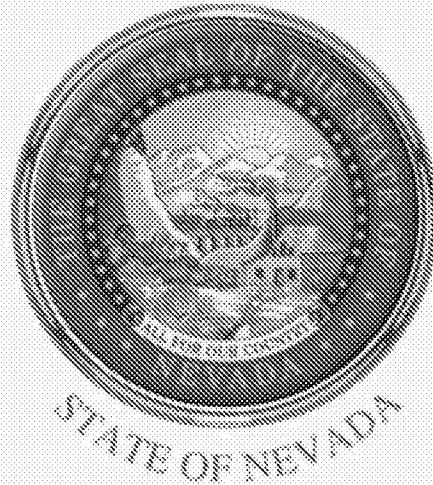
04/24/2018  
 Date

\*If changing Registered Agent when reinstating, officer's signature required.

X  
 Signature of Officer

Date

SECRETARY OF STATE



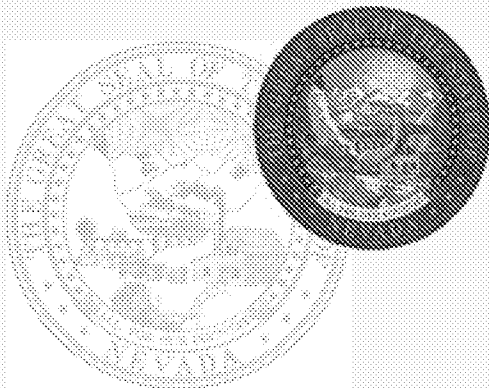
## NEVADA STATE BUSINESS LICENSE

**THE MARK TRAVEL COMPANY, LLC**  
Nevada Business Identification # NV19831001606

**Expiration Date: April 30, 2019**

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 27, 2018

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

*You may verify this license at [www.nvsos.gov](http://www.nvsos.gov) under the Nevada Business Search.*

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which by law cannot be waived.

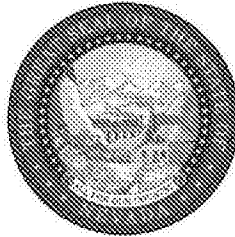
TRADEMARK

REEL: 006324 FRAME: 0127

STATE OF NEVADA

**BARBARA K. CEGAVSKE**  
*Secretary of State*

**KIMBERLEY PERONDI**  
*Deputy Secretary  
for Commercial Recordings*



**Commercial Recordings Division**

*202 N. Carson Street  
Carson City, NV 89701-4201  
Telephone (775) 684-5708  
Fax (775) 684-7138*

OFFICE OF THE  
SECRETARY OF STATE

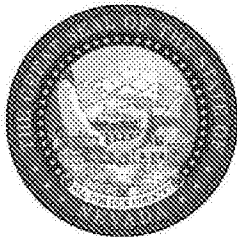
**Certified Copy**

April 27, 2018

**Job Number:** C20180427-0984  
**Reference Number:** 00010963703-29  
**Expedite:**  
**Through Date:**

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

<b>Document Number(s)</b>	<b>Description</b>	<b>Number of Pages</b>
20180190373-04	Articles of Organization	2 Pages/1 Copies



Respectfully,

Barbara K. Cegavske  
Secretary of State

Certified By: Caroline Fuentes  
Certificate Number: C20180427-0984

**Commercial Recording Division**  
202 N. Carson Street  
Carson City, Nevada 89701-4201  
Telephone (775) 684-5708  
Fax (775) 684-7138

**TRADEMARK**  
**REEL: 006324 FRAME: 0128**





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\*050106\*

**Articles of Organization**  
**Limited-Liability Company**  
 (PURSUANT TO NRS CHAPTER 86)

Filed in the office of <i>Barbara K. Cegavske</i>	Document Number <b>20180190373-04</b>
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time <b>04/27/2018 10:33 AM</b>
	Entity Number <b>C2427-1983</b>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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<b>1. Name of Limited-Liability Company:</b> (must contain approved limited-liability company wording; see instructions)	THE MARK TRAVEL COMPANY, LLC	Check box if a Series Limited-Liability Company <input type="checkbox"/>	Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: The Corporation Trust Company of Nevada Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below)		
<b>3. Dissolution Date:</b> (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):		
<b>4. Management:</b> (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) <b>OR</b> <input checked="" type="checkbox"/> Member(s) (check only one box)		
<b>5. Name and Address of each Manager or Managing Member:</b> (attach additional page if more than 3)	1) La Macchia Enterprises, Inc. Name 8907 North Port Washington Road Street Address Milwaukee City WI 53217 City State Zip Code 2) _____ Name Street Address City State Zip Code 3) _____ Name Street Address City State Zip Code		
<b>6. Name, Address and Signature of Organizer:</b> (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. William E. La Macchia Name 8907 North Port Washington Road Address Milwaukee City WI 53217 City State Zip Code Organizer Signature		
<b>7. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Organization, submit a separate signed Registered Agent Acceptance form. <input checked="" type="checkbox"/> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date		

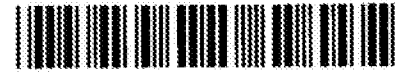
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Nevada Secretary of State NRS 86 DLLC  
 Articles Revised: 9-26-17

**TRADEMARK**  
**REEL: 006324 FRAME: 0129**



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 Secretary of State  
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 Carson City, Nevada 89701-4201  
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\*180304\*

## Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

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(complete only one)

- a)  commercial registered agent listed with the Nevada Secretary of State,
- b)  noncommercial registered agent with the following address for service of process:

701 S. Carson St., Ste. 200 Carson City Nevada 89701  
 Street Address City Zip Code

Nevada   
 Mailing Address (if different from street address) City Zip Code

- c)  represented entity accepting own service of process at the following address:

Title of Office or Position of Person in Represented Entity

Nevada   
 Street Address City Zip Code

Nevada   
 Mailing Address (if different from street address) City Zip Code

and hereby state that on 04/24/2018 I accepted the appointment as registered agent for  
 the above named business entity. Date

X Stephanie Henry  
 Authorized Signature of R.A. or On Behalf of R.A. Company

04/24/2018  
 Date

\*If changing Registered Agent when reinstating, officer's signature required.

X  
 Signature of Officer

Date

Nevada Secretary of State Form RA Acceptance  
 Revised: 1-5-15