

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM495594

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	08/16/2018
RESUBMIT DOCUMENT ID:	900465037

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Citation Business Forms, Inc.		08/16/2018	Corporation: NEW YORK

RECEIVING PARTY DATA

Name:	Citation Healthcare Labels, LLC
Street Address:	55 Engineers Road
City:	Hauppauge
State/Country:	NEW YORK
Postal Code:	11788
Entity Type:	Limited Liability Company: DELAWARE

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	2447101	PERMA-PEEL

CORRESPONDENCE DATA

Fax Number: 4149788675
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: 414 277 5675
Email: marta.levine@quarles.com
Correspondent Name: Marta S. Levine
Address Line 1: 411 East Wisconsin Avenue
Address Line 2: Quarles & Brady LLP
Address Line 4: Milwaukee, WISCONSIN 53202

ATTORNEY DOCKET NUMBER:	158346.00010
NAME OF SUBMITTER:	Marta S. Levine
SIGNATURE:	/MartaLevine/
DATE SIGNED:	10/26/2018

Total Attachments: 5

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UNITED STATES PATENT AND TRADEMARK OFFICE

UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND
DIRECTOR OF THE UNITED STATES PATENT AND TRADEMARK OFFICE

October 18, 2018

PTAS

MARTA S. LEVINE
411 EAST WISCONSIN AVENUE
QUARLES & BRADY LLP
MILWAUKEE, WI 53202



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United States Patent and Trademark Office
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Documents being resubmitted for recordation must reflect the corrected information to be recorded, the Document ID number referenced above and all pages from this submitted document. The original date of filing of this assignment document will be maintained if resubmitted with the appropriate correction(s) by **Monday, November 19, 2018**, as outlined under 37 CFR 3.51. The resubmitted document must include a stamp with the official date of receipt under 37 CFR 3. Applicants may use the certified procedures under 37 CFR 2.197 or 2.198 for resubmission of the returned papers if they desire to have the benefit of the date of deposit in the United States Postal Service.

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STEFANIE BRYCE
ASSIGNMENT RECORDATION BRANCH
PUBLIC RECORDS DIVISION

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM488845

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	MERGER AND CHANGE OF NAME		
EFFECTIVE DATE:	08/16/2018		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Citation Business Forms, Inc.		08/16/2018	Corporation: NEW YORK
NEWLY MERGED ENTITY DATA			
Name	Execution Date	Entity Type	
Citation Healthcare Labels, LLC	08/16/2018	Limited Liability Company: DELAWARE	
MERGED ENTITY'S NEW NAME (RECEIVING PARTY)			
Name:	Citation Healthcare Labels, LLC		
Street Address:	55 Engineers Road		
City:	Hauppauge		
State/Country:	NEW YORK		
Postal Code:	11788		
Entity Type:	Limited Liability Company: DELAWARE		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2447101	PERMA-PEEL	
CORRESPONDENCE DATA			
Fax Number:	4149788675		
<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:	414 277 5675		
Email:	marta.levine@quarles.com		
Correspondent Name:	Marta S. Levine		
Address Line 1:	411 East Wisconsin Avenue		
Address Line 2:	Quarles & Brady LLP		
Address Line 4:	Milwaukee, WISCONSIN 53202		
ATTORNEY DOCKET NUMBER:	158346.00010		
NAME OF SUBMITTER:	Marta S. Levine		
SIGNATURE:	/MartaLevine/		

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"CITATION BUSINESS FORMS, INC.", A NEW YORK CORPORATION, WITH AND INTO "CITATION HEALTHCARE LABELS, LLC" UNDER THE NAME OF "CITATION HEALTHCARE LABELS, LLC", A LIMITED LIABILITY COMPANY ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF AUGUST, A.D. 2018, AT 12:42 O`CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

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SR# 20186205932

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203259595
Date: 08-16-18

TRADEMARK
REEL: 006512 FRAME: 0927

CERTIFICATE OF MERGER

OF

CITATION BUSINESS FORMS, INC.

AND

CITATION HEALTHCARE LABELS, LLC

Pursuant to Title 6, Section 18-209 of the Delaware Limited Liability Company Act.

1. The name of the surviving limited liability company is Citation Healthcare Labels, LLC, which is a Delaware limited liability company ("**Citation LLC**").
2. The name of the corporation being merged into this surviving limited liability company is Citation Business Forms, Inc. ("**Citation Inc.**"). The jurisdiction in which this corporation was formed is New York.
3. The Agreement and Plan of Merger, dated as of August 16, 2018, by and between Citation LLC and Citation Inc. (the "**Agreement of Merger**") has been approved and executed by both Citation LLC and Citation Inc.
4. The executed Agreement of Merger is on file at 55 Engineers, Road, Hauppauge, New York 11788, the principal place of business of Citation LLC, the surviving limited liability company.
5. A copy of the Agreement of Merger will be furnished by Citation LLC, the surviving limited liability company, on request, without cost, to any member of Citation LLC or any person holding an interest in any other business entity which is to merge or consolidate.
6. The certificate of formation of the surviving limited liability company shall continue unchanged as the certificate of formation after the merger is effective.
7. The merger is to become effective upon the filing of this Certificate of Merger with the Secretary of State of Delaware.

IN WITNESS WHEREOF, said limited liability company has caused this certificate to be signed by an authorized person, this 16th day of August, 2018.

/s/ Richard Bolnick

Richard Bolnick, Authorized Person

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