

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM512141

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Little Lady Foods, Inc.		01/25/2019	Corporation: ILLINOIS
RECEIVING PARTY DATA			
Name:	Little Lady Foods LLC		
Street Address:	2323 Pratt Boulevard		
City:	Elk Grove Village		
State/Country:	ILLINOIS		
Postal Code:	60007		
Entity Type:	Limited Liability Company: ILLINOIS		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	3953763	LITTLE LADY FOODS	
Registration Number:	3953762	LITTLE LADY FOODS	
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:	310-201-5240		
Email:	jlarkin@seyfarth.com		
Correspondent Name:	Joan Kupersmith Larkin		
Address Line 1:	2029 Century Park East, Suite 3500		
Address Line 4:	Los Angeles, CALIFORNIA 90067		
ATTORNEY DOCKET NUMBER:	067368-000010		
NAME OF SUBMITTER:	Joan Kupersmith Larkin		
SIGNATURE:	/Joan Kupersmith Larkin/		
DATE SIGNED:	02/28/2019		
Total Attachments: 5			
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CH \$65.00 3953763



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

JANUARY 25, 2019

0714831-3

BRIAN B. GILBERT
222 N. LASALLE ST., STE. 800
CHICAGO, IL 60601-0000

RE LITTLE LADY FOODS LLC

DEAR SIR OR MADAM:

IT HAS BEEN OUR PLEASURE TO APPROVE AND PLACE ON RECORD THE ARTICLES OF ORGANIZATION THAT CREATED YOUR LIMITED LIABILITY COMPANY. WE EXTEND OUR BEST WISHES FOR SUCCESS IN YOUR NEW VENTURE.

PLEASE NOTE! THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF THIS ANNIVERSARY MONTH NEXT YEAR. FAILURE TO TIMELY FILE MAY RESULT IN PENALTY AND DISSOLUTION. A PRE-PRINTED ANNUAL REPORT WILL BE MAILED TO THE REGISTERED AGENT AT THE REGISTERED OFFICE ADDRESS APPROXIMATELY 45 DAYS BEFORE THE DUE DATE.

A LIMITED LIABILITY COMPANY THAT INTENDS TO PROVIDE A PROFESSIONAL SERVICE REGULATED BY THE ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION MUST REGISTER WITH THAT AGENCY.

ARTICLES OF CONVERSION HAVE BEEN PLACED ON FILE AND THE LIMITED LIABILITY COMPANY CREDITED WITH THE REQUIRED FEE.

PUBLICATIONS/FORMS AND OTHER SERVICES ARE AVAILABLE ON OUR WEBSITE. VISIT WWW.CYBERDRIVEILLINOIS.COM TO VIEW THE STATUS OF THIS COMPANY, PURCHASE A CERTIFICATE OF GOOD STANDING, OR EVEN FILE THE ANNUAL REPORT REFERRED TO IN THE EARLIER PARAGRAPH.

SINCERELY YOURS,

JESSE WHITE
ILLINOIS SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY DIVISION
(217) 524-8008

TRADEMARK
REEL: 006577 FRAME: 0555

EOA 205

Illinois Secretary of State
Department of Business Services
STATEMENT OF CONVERSION

Secretary of State
Department of Business Services
501 S. Second St., Rm. 350
Springfield, IL 62756
217-782-6961
www.cyberdriveillinois.com

Remit payment in the form of a cashier's check, a certified check, a money order, or an Illinois attorney's or a CPA's check payable to Secretary of State.

FILED
JAN 25 2019
JESSE WHITE
SECRETARY OF STATE

07148313
New Entity File Number

Filing Fee: \$100 _____ Approved: 

_____ Submit in duplicate _____ Type or print clearly in black ink _____ Do not write above this line _____

Converting Entity _____ Current file number: 39625849

1. Converting Entity Name: Little Lady Foods, Inc.
2. Current Entity Type: (select only one)

<input checked="" type="checkbox"/> For Profit Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership	
3. Jurisdiction and Date of Incorporation/Organization: Illinois, 2/23/1960
4. The conversion is authorized by the law of the foreign entity's jurisdiction of organization.

New Entity

5. Converted Entity Name: Little Lady Foods LLC
6. Converted Entity Type: (select only one)

<input type="checkbox"/> For Profit Corporation	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership	
7. Jurisdiction of Incorporation/Organization: Illinois
8. The Converted Entity: (select only one)

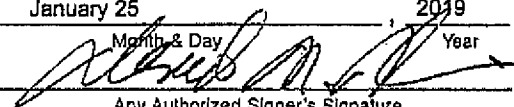
intends to transact business in Illinois will not be transacting business in Illinois (Please set forth address below.)

 Address for Service of Process: 222 N LaSalle St Ste 800
 (P.O. Box alone is not acceptable) Chicago, IL 60601
9. Effective Date of Conversion: _____ If a future date is chosen, MUST be within 90 days of filing.

Upon Filing Future Effective Date: _____

The Conversion was approved in accordance with Section 205 of the Entity Omnibus Act.
The formation document and fee for the Converted Entity must be attached.

10. The undersigned Entity has caused this statement to be signed by a duly authorized signer who affirms, under penalties of perjury, that the facts stated herein are true and correct. All signatures must be in BLACK INK.

Dated January 25, 2019
Month & Day Year

Any Authorized Signer's Signature
David M. Rubin, Secretary
Name and Title (type or print)

Little Lady Foods, Inc.
Exact Name of Converting Entity


Form **LLC-5.5**
 May 2018

Secretary of State
 Department of Business Services
 Limited Liability Division
 501 S. Second St., Rm. 351
 Springfield, IL 62756
 217-524-8008
 www.cyberdriveillinois.com

Payment must be made by certified check, cashier's check, Illinois attorney's check, C.P.A.'s check or money order payable to Secretary of State.

Illinois
 Limited Liability Company Act
 Articles of Organization

SUBMIT IN DUPLICATE
 Type or print clearly.

Filing Fee: \$150
 Approved: 

FILE #

This space for use by Secretary of State.

FILED

JAN 25 2019

JESSE WHITE
 SECRETARY OF STATE

1. Limited Liability Company name (see Note 1): Little Lady Foods LLC

2. Address of principal place of business where records of the company will be kept: (P.O. Box alone or c/o is unacceptable.)
2323 Pratt Blvd., Elk Grove Village, IL 60007

3. Articles of Organization effective on: (check one).
 the filing date
 a later date (not to exceed 60 days after the filing date): _____
 Month, Day, Year

4. Registered agent's name and registered office address:

Registered agent:	<u>Brian B Gilbert</u>		
(P.O. Box alone or c/o is unacceptable.)	First Name	Middle Initial	Last Name
Registered office:	<u>222 N LaSalle St</u>		<u>Ste 800</u>
	Number	Street	Suite #
	<u>Chicago</u>	<u>IL</u>	<u>60601</u>
	City		ZIP

Note: The registered agent must reside in Illinois. If the agent is a business entity, it must be authorized to act as agent in this state.

5. Purpose(s) for which the Limited Liability Company is organized: (see Note 2)
 The transaction of any or all lawful business for which Limited Liability Companies may be organized under this Act and/or exclusively for the purpose(s) stated below:

6. The duration of the company is perpetual unless otherwise stated. If the operating agreement provides for a dissolution date, enter that date here: _____
 Month/Day Year

LLC-5.5

7. Optional: Other provisions for the regulation of the internal affairs of the company: (If additional space is needed, use sheets of this size.)

8. The Limited Liability Company has or will have on the effective date of filing one or more members.

9. Name(s) and business address(es) of the manager(s) and any member with the authority of manager:

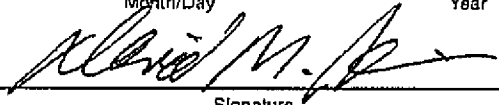
HCC Manager LLC	222 N LaSalle St Ste 1000	Chicago	IL	60601
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP

(If additional space is needed, use sheets of this size.)

10. Name and Address of Organizer(s):

I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Organization are to the best of my knowledge and belief, true, correct and complete.

Dated: January 25, 2019
Month/Day Year

1. 
Signature

David M. Rubin, Organizer
Name and Title (type or print)

If organizer is signing for a company or other entity, state name of company or entity.

2. _____
Signature

Name (type or print)

If organizer is signing for a company or other entity, state name of company or entity.

1. 222 N LaSalle St Ste 1000
Number Street

Chicago
City

Illinois 60601
State ZIP

2. _____
Number Street

City

State ZIP

Note 1: The name must contain the term Limited Liability Company, LLC or L.L.C. The name cannot contain any of the following terms: "Corporation," "Corp.," "Incorporated," "Inc.," "Ltd.," "Co.," "Limited Partnership" or "LP." However, a limited liability company that will provide services licensed by the Illinois Department of Financial and Professional Regulation must instead contain the term Professional Limited Liability Company, PLLC or P.L.L.C. in the name.

Note 2: A professional limited liability company must state the specific professional service or related professional services to be rendered by the professional limited liability company.

TRADEMARK

REEL: 006577 FRAME: 0558



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

0714831-3

01/25/2019

BRIAN B. GILBERT
222 N. LASALLE ST., STE. 800
CHICAGO, IL 60601-0000

RE MIRACAPO PIZZA COMPANY LLC

DEAR SIR OR MADAM:

ARTICLES OF AMENDMENT HAVE BEEN PLACED ON FILE AND THE LIMITED LIABILITY COMPANY CREDITED WITH THE REQUIRED FILING FEE.

SINCERELY YOURS,

JESSE WHITE
ILLINOIS SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY DIVISION
(217) 524-8008