

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM514337

<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>
Talent Solutions, Inc.		09/29/2017	Corporation: DELAWARE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Talent Solutions, LLC		
<b>Street Address:</b>	333 7th Avenue, Suite 1702		
<b>City:</b>	New York		
<b>State/Country:</b>	NEW YORK		
<b>Postal Code:</b>	10001		
<b>Entity Type:</b>	Limited Liability Company: DELAWARE		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	2880002	TALENT SOLUTIONS	
<b>Registration Number:</b>	3186000	TALENT SOLUTIONS	
<b>Registration Number:</b>	3605007	TALENT SOLUTIONS	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<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>	415-932-6557		
<b>Email:</b>	elizabeth@crownllp.com		
<b>Correspondent Name:</b>	Elizabeth J. Rest		
<b>Address Line 1:</b>	155 Montgomery Street, Suite 1401		
<b>Address Line 4:</b>	San Francisco, CALIFORNIA 94104		
<b>NAME OF SUBMITTER:</b>	Elizabeth J. Rest		
<b>SIGNATURE:</b>	/elizabeth j. rest/		
<b>DATE SIGNED:</b>	03/14/2019		
<b>Total Attachments: 4</b>			
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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 THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE CORPORATION UNDER THE NAME OF "TALENT SOLUTIONS, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "TALENT SOLUTIONS, INC." TO "TALENT SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE FOURTH DAY OF OCTOBER, A.D. 2017, AT 1:27 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

4685380 8100V  
SR# 20176472368

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203342130  
Date: 10-04-17

**TRADEMARK**  
**REEL: 006591 FRAME: 0435**

STATE OF DELAWARE  
CERTIFICATE OF CONVERSION  
FROM A CORPORATION TO A  
LIMITED LIABILITY COMPANY PURSUANT TO  
SECTION 18-214 OF THE LIMITED LIABILITY ACT

- 1.) The jurisdiction where the Corporation first formed is Delaware.
- 2.) The jurisdiction immediately prior to filing this Certificate is Delaware.
- 3.) The date the corporation first formed is May 08, 2009.
- 4.) The name of the Corporation immediately prior to filing this Certificate is  
Talent Solutions, Inc.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of  
Formation is Talent Solutions, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the  
29<sup>th</sup> day of September, A.D. 2017.

By   
Authorized Person

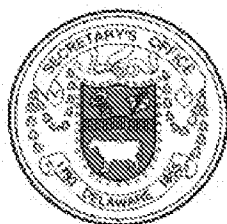
Name: Shara A. Lerman  
Print or Type

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "TALENT SOLUTIONS, LLC" FILED IN THIS OFFICE ON THE FOURTH DAY OF OCTOBER, A.D. 2017, AT 1:27 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

4685380 8100V  
SR# 20176472368

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203342130  
Date: 10-04-17

**TRADEMARK**  
**REEL: 006591 FRAME: 0437**

STATE of DELAWARE  
LIMITED LIABILITY COMPANY  
CERTIFICATE of FORMATION

**First:** The name of the limited liability company is Talent Solutions, LLC.

**Second:** The address of its registered office in the State of Delaware is c/o National Registered Agents, Inc., 160 Greentree Drive, Suite 101, in the City of Dover, DE 19904. The name of its Registered agent at such address is National Registered Agents, Inc.

**Third:** The duration of this limited liability company will be perpetual.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation this 29<sup>th</sup> day of September, 2017.

By:   
Authorized Person(s)

Name: Shara A. Lerman