

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM524402

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
NAP, Inc.	FORMERLY DBA Sleepy Wrap, Inc.	06/03/2011	Corporation: COLORADO
RECEIVING PARTY DATA			
Name:	Boba Inc.		
Street Address:	P. O. Box 3808		
City:	Boulder		
State/Country:	COLORADO		
Postal Code:	80307		
Entity Type:	Corporation: COLORADO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	4199454	FREEDOM TOGETHER	
CORRESPONDENCE DATA			
Fax Number:	9137775601		
<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:	913-777-5600		
Email:	trademarks@eriseip.com		
Correspondent Name:	Erise IP P.A.		
Address Line 1:	7015 College Blvd., Ste 700		
Address Line 4:	Overland Park, KANSAS 66211		
NAME OF SUBMITTER:	Jonathan L. Hines		
SIGNATURE:	/Jonathan L. Hines/		
DATE SIGNED:	05/21/2019		
Total Attachments: 2			
source=Name Change Colorado#page1.tif			
source=Name Change Colorado#page2.tif			

CH \$40.00 4199454



Colorado Secretary of State
 Date and Time: 06/03/2011 10:24 AM
 ID Number: 20071022526
 Document number: 20111324621
 Amount Paid: \$25.00

Document must be filed electronically.
 Paper documents will not be accepted.

Document processing fee \$25.00
 Fees & forms/cover sheets
 are subject to change.

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ABOVE SPACE FOR OFFICE USE ONLY

Articles of Amendment

filed pursuant to §7-90-301, et seq. and §7-110-106 of the Colorado Revised Statutes (C.R.S.)

ID number: 20071022526

1. Entity name: Nap, Inc.
(If changing the name of the corporation, indicate name BEFORE the name change)

2. New Entity name:
 (if applicable) Boba Inc.

3. Use of Restricted Words *(if any of these
 terms are contained in an entity name, true
 name of an entity, trade name or trademark
 stated in this document, mark the applicable
 box):*

- "bank" or "trust" or any derivative thereof
- "credit union" "savings and loan"
- "insurance", "casualty", "mutual", or "surety"

4. Other amendments, if any, are attached.

5. If the amendment provides for an exchange, reclassification or cancellation of issued shares, the attachment states the provisions for implementing the amendment.

6. If the corporation's period of duration
 as amended is less than perpetual, state
 the date on which the period of duration
 expires: _____
(mm/dd/yyyy)

OR

If the corporation's period of duration as amended is perpetual, mark this box:

7. (Optional) Delayed effective date: _____
(mm/dd/yyyy)

Notice:

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

8. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

Antunovic Robert _____
(Last) (First) (Middle) (Suffix)

PO Box 3808

(Street name and number or Post Office information)

Boulder CO 80307

(City) (State) (Postal/Zip Code)

United States

(Province – if applicable) (Country – if not US)

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box and include an attachment stating the name and address of such individuals.)

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