

## TRADEMARK ASSIGNMENT COVER SHEET


Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM528405

<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>
Jako Enterprises, Ltd.		01/23/2019	Corporation:
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Jako Enterprises, LLC		
<b>Street Address:</b>	2030 E Byberry Rd		
<b>City:</b>	Philadelphia		
<b>State/Country:</b>	PENNSYLVANIA		
<b>Postal Code:</b>	19116		
<b>Entity Type:</b>	Limited Liability Company: PENNSYLVANIA		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4704233	CAMP ORIGINAL CO.	
<b>Registration Number:</b>	3650330	CHAPEL & GREED	
<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>Email:</b>	trademarks@parkerpoe.com		
<b>Correspondent Name:</b>	William B. Cannon		
<b>Address Line 1:</b>	301 Fayetteville Street, Suite 1400		
<b>Address Line 4:</b>	Raleigh, NORTH CAROLINA 27601		
<b>ATTORNEY DOCKET NUMBER:</b>	33217-00002		
<b>NAME OF SUBMITTER:</b>	William B. Cannon		
<b>SIGNATURE:</b>	/William B. Cannon/		
<b>DATE SIGNED:</b>	06/19/2019		
<b>Total Attachments: 5</b>			
source=PC56 Statement of Conversion of Enterprises (Pennsylvania)-c#page1.tif			
source=PC56 Statement of Conversion of Enterprises (Pennsylvania)-c#page2.tif			
source=PC56 Statement of Conversion of Enterprises (Pennsylvania)-c#page3.tif			
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source=PC56 Statement of Conversion of Enterprises (Pennsylvania)-c#page5.tif			

OP \$65.00 4704233

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Return document by mail to: <u>CSC order # 598708-15</u> <i>LBZ</i> Name _____ _____ _____ CSC (xx) Return document by email to: <u>cscpa@cscglobal.com</u>	<p>Statement of Conversion FORM 15 344</p>  <p>TCO190123RA0867</p>
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Read all instructions prior to completing.

Fee: \$70

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 355 (relating to Statement of conversion), the undersigned association, desiring to effect a conversion, hereby states that:

A. For the converting association:

1. The name of the converting association is: Jako Enterprises, Ltd.

2. The jurisdiction of formation of the converting association is: Pennsylvania

3. The type of association is (check only one):

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership                     | <input type="checkbox"/> Business Trust           |
| <input type="checkbox"/> Nonprofit Corporation           | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company       | <input type="checkbox"/> Limited Liability Limited Partnership   | <input type="checkbox"/> Other _____              |

4. Date on which the association was created, incorporated, formed or otherwise came into existence:

03/05/2001  
(MM/DD/YYYY)

5. If the converting association is a domestic filing association (a Pennsylvania business corporation, nonprofit corporation, limited partnership, limited liability company, professional association or business trust), the statute under which it was first created, incorporated, formed or otherwise came into existence:


Business Corporation Law of 1988  
(ex. Business Corporation Law of 1988, Limited Liability Company Law of 1994, etc.)

2019 JAN 20 PM 1:13  
PA DEPT OF STATE





**PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: <hr/> Name <hr/> <p style="text-align: center;">CSC</p> <input checked="" type="checkbox"/> Return document by email to: <a href="mailto:escpa@escglobal.com">escpa@escglobal.com</a>	Certificate of Organization Domestic Limited Liability Company DSCB:15-8821 (rev. 2/2017)  
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Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$125       I qualify for a veteran/reservist-owned small business fee exemption (see instructions)

In compliance with the requirements of 15 Pa.C.S. § 8821 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company is: Jako Enterprises, LLC  
*(designator is required, e.g., "company," "limited" or "limited liability company" or any abbreviation thereof)*
  
2. Complete part (a) or (b) -- not both:
  - (a) The address of this limited liability company's registered office in this Commonwealth is:  
*(post office box alone is not acceptable)*  

<u>2030 East Byberry Road, Philadelphia, PA 19116</u>		<u>Philadelphia</u>		
<small>Number and Street</small>	<small>City</small>	<small>State</small>	<small>Zip</small>	<small>County</small>
  
  - (b) The name of this limited liability company's commercial registered office provider and county of venue is:  
 \_\_\_\_\_  
c/o: Name of Commercial Registered Office Provider County
  
3. The name of each organizer is *(all organizers must sign on page 2)*:  
N/A  


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4. Effective date of Certificate of Organization *(check, and if appropriate complete, one of the following)*:
  - The Certificate of Organization shall be effective upon filing in the Department of State.
  - The Certificate of Organization shall be effective on: 01/23/2019 at 3:00 p.m.  
Date (MM/DD/YYYY) Hour (if any)

**5. Restricted professional companies only.**

*Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).*

The company is a restricted professional company organized to render the following restricted professional service(s):

- Chiropractic
- Dentistry
- Law
- Medicine and surgery
- Optometry
- Osteopathic medicine and surgery
- Podiatric medicine
- Public accounting
- Psychology
- Veterinary medicine

**6. Benefit companies only.**

*Check the box immediately below if the limited liability company is organized as a benefit company:*

This limited liability company shall have the purpose of creating general public benefit.

*Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s).*

*See instructions for examples of specific public benefit.*

This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):

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7. For additional provisions of the certificate, if any, attach 8½ x 11 sheet(s).

IN TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this

\_\_23rd\_\_ day of \_\_January\_\_, 2019

\_\_\_\_\_  
N/A  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature