

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM534313

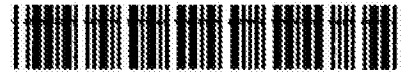
<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
WORK OR DON'T EAT LLC		06/03/2019	Limited Liability Company: MARYLAND
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	WORK OR DON'T EAT, LLC		
<b>Street Address:</b>	6440 Sky Pointe Drive		
<b>Internal Address:</b>	Suite 140-462		
<b>City:</b>	Las Vegas		
<b>State/Country:</b>	NEVADA		
<b>Postal Code:</b>	89131		
<b>Entity Type:</b>	Limited Liability Company: NEVADA		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Serial Number:</b>	87361226	WORK OR DON'T EAT	
<b>Serial Number:</b>	86547311	WORK OR DON'T EAT	
<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>	2025798383		
<b>Email:</b>	eperrott@gerbenlawfirm.com		
<b>Correspondent Name:</b>	Eric Perrott, Esq.		
<b>Address Line 1:</b>	1050 Connecticut Ave. NW		
<b>Address Line 2:</b>	Suite 500		
<b>Address Line 4:</b>	Washington, D.C. 20036		
<b>NAME OF SUBMITTER:</b>	Eric Perrott, Esq.		
<b>SIGNATURE:</b>	/Eric Perrott, Esq./		
<b>DATE SIGNED:</b>	07/30/2019		
<b>Total Attachments: 5</b>			
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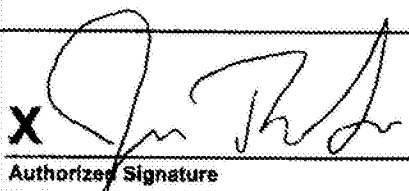
BARBARA K. CEGAVSKE  
Secretary of State  
202 North Carson Street  
Carson City, Nevada 89701-4201  
(775) 684-5708  
Website: www.nvsos.gov

**Articles of Domestication**  
(PURSUANT TO NRS 92A.270)

Filed in the office of <i>Barbara K. Cegavske</i>	Document Number <b>20190242013-84</b>
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time <b>06/03/2019 1:00 PM</b>
	Entity Number <b>E0258942019-7</b>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Entity Name and Type of Domestic Entity as set forth in its Charter Documents:	Work or Don't Eat, LLC Limited Liability Company
2. Entity Name Before Filing Articles of Domestication:	Work Or Don't Eat, LLC
3. Date and Jurisdiction of Original Formation:	December 17, 2014 and Maryland
4. Jurisdiction that Constituted the Principal Place of Business, Central Administration or Equivalent of the Undomesticated Entity Immediately Before Articles of Domestication:	Maryland
5. Signature of Authorized Representative:	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">   <input checked="" type="checkbox"/> Authorized Signature         </div> <div style="text-align: right;">           5/31/2019            Date         </div> </div>

Filing Fee: \$350.00

**IMPORTANT:** This document must be accompanied by the appropriate constituent document for the type of domestic entity described in article 1 above and the filing fees.

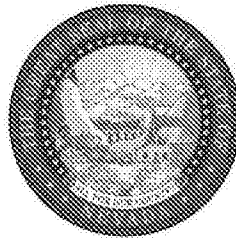
This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 92A Domestication  
Revised: 1-5-15

**TRADEMARK**  
**REEL: 006707 FRAME: 0171**

STATE OF NEVADA

**BARBARA K. CEGAVSKE**  
*Secretary of State*



**Commercial Recordings Division**  
 202 N. Carson Street  
 Carson City, NV 89701-4201  
 Telephone (775) 684-5708  
 Fax (775) 684-7138

**KIMBERLEY PERONDI**  
*Deputy Secretary  
 for Commercial Recordings*

OFFICE OF THE  
**SECRETARY OF STATE**

WORK OR DON'T EAT, LLC  
 NV

**Job:**C20190604-1099  
 June 4, 2019

**Special Handling Instructions:**  
 CHARTER, ILO, EMAILED. JP 6-4-19

**Charges**

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Articles of Organization	20190242014-95	6/3/2019 1:00:52 PM	1	\$75.00	\$75.00
Domestication	20190242013-84	6/3/2019 1:00:52 PM	1	\$350.00	\$350.00
Initial List	20190242015-06	6/3/2019 1:00:52 PM	1	\$150.00	\$150.00
Business License 6/2019-6/2020	20190242015-06	6/3/2019 1:00:52 PM	1	\$200.00	\$200.00
Total					\$775.00

**Payments**

Type	Description	Amount
Credit	5596848417216491403022	\$775.00
Total		\$775.00

**Credit Balance: \$0.00**

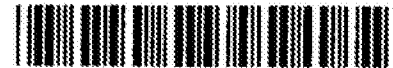
**Job Contents:**

LLC Charter 1  
 File Stamped Copies 3  
 Business License 1

WORK OR DON'T EAT, LLC  
 NV



**BARBARA K. CEGAVSKE**  
 Secretary of State  
 202 North Carson Street  
 Carson City, Nevada 89701-4201  
 (775) 684-5708  
 Website: www.nvsos.gov



\*050106\*

**Articles of Organization**  
**Limited-Liability Company**  
 (PURSUANT TO NRS CHAPTER 86)

Filed in the office of <i>Barbara K. Cegavske</i>	Document Number <b>20190242014-95</b>
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time <b>06/03/2019 1:00 PM</b>
	Entity Number <b>E0258942019-7</b>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Limited-Liability Company:</b> (must contain approved limited-liability company wording; see instructions)	Work Or Don't Eat, LLC	Check box if a Series Limited-Liability Company <input type="checkbox"/>	Check box if a Restricted Limited-Liability Company <input type="checkbox"/>
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input type="checkbox"/> Commercial Registered Agent: Name <input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Jermaine Seagears Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity 6440 Sky Pointe Drive, Suite 140-462 Las Vegas Nevada 89131 Street Address City Zip Code Mailing Address (if different from street address) City Nevada Zip Code		
<b>3. Dissolution Date:</b> (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):		
<b>4. Management:</b> (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) <b>OR</b> <input checked="" type="checkbox"/> Member(s) (check only one box)		
<b>5. Name and Address of each Manager or Managing Member:</b> (attach additional page if more than 3)	1) Jermaine Seagears Name 6440 Sky Pointe Drive, Suite 140-462 Las Vegas NV 89131 Street Address City State Zip Code 2) Name Street Address City State Zip Code 3) Name Street Address City State Zip Code		
<b>6. Name, Address and Signature of Organizer:</b> (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. Jermaine Seagears Name <b>X</b> <i>J Seagears</i> Organizer Signature 6440 Sky Pointe Drive, Suite 140-462 Las Vegas NV 89131 Address City State Zip Code		
<b>7. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Organization, submit a separate signed Registered Agent Acceptance form. <b>X</b> <i>J Seagears</i> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date 05/16/2019		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 86.131 LC  
 Articles Repealed 8/2017

**TRADEMARK**  
 REEL: 006707 FRAME: 0173

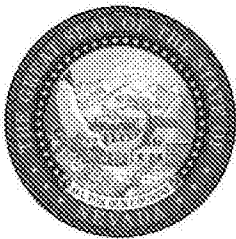


SECRETARY OF STATE



## LIMITED LIABILITY COMPANY CHARTER

I, Barbara K. Cegavske, the Nevada Secretary of State, do hereby certify that **WORK OR DON'T EAT, LLC** did on June 3, 2019, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization is now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 4, 2019.

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

Certified By: Jennifer Perry  
Certificate Number: C20190604-1099

TRADEMARK

RECORDED: 07/30/2019

REEL: 006707 FRAME: 0175