

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM537894

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	CHANGE OF NAME
RESUBMIT DOCUMENT ID:	900509269

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Mosaic International LLC		11/20/2013	Limited Liability Company: CALIFORNIA

RECEIVING PARTY DATA

Name:	LE Holdings LLC
Street Address:	PO Box 585
City:	Alamo
State/Country:	CALIFORNIA
Postal Code:	94507
Entity Type:	Limited Liability Company: CALIFORNIA

PROPERTY NUMBERS Total: 20

Property Type	Number	Word Mark
Registration Number:	4352443	SMART MONEY CLIP
Serial Number:	85757912	BUN EASE
Registration Number:	4334956	CLIP-N-BANGS
Registration Number:	4311592	CLIP-N-BLING
Registration Number:	4259457	CLIP-N-BRAIDS
Registration Number:	3443892	CLIP-N-COLOR
Registration Number:	4300175	CLIP-N-DIPPED ENDS
Registration Number:	4334950	EZ-TWIST
Registration Number:	4443922	HOLEY ROLLERS
Registration Number:	4334520	LOCKETTES
Registration Number:	4443921	MANE STATEMENT
Registration Number:	3140437	PUFFY PONY
Registration Number:	4638668	ROLLER BALLS
Registration Number:	2621904	TONYTAIL
Registration Number:	4449790	WRAPLET
Registration Number:	4300308	SMART BELT BUCKLE
Registration Number:	2436613	SMART MONEY CLIP
Registration Number:	2768687	SMART POCKET

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Property Type	Number	Word Mark
Registration Number:	3839388	SMART WALLET
Registration Number:	2158797	STORUS

CORRESPONDENCE DATA

Fax Number:

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.

Phone: 415-517-9033
 Email: mia@mosaicbrandsinc.com
 Correspondent Name: Mia Kaminski
 Address Line 1: PO Box 585
 Address Line 4: Alamo, CALIFORNIA 94507

NAME OF SUBMITTER:	Mia Kaminski
SIGNATURE:	/Mia Kaminski/
DATE SIGNED:	08/23/2019

Total Attachments: 1
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LLC-10

Restated Articles of Organization of a Limited Liability Company (LLC)

To restate the articles of organization of a California limited liability company, you can fill out this form, and submit for filing along with:

- A \$30 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form or document.

Upon filing, these restated articles of organization will supersede the initial articles of organization and all amendments previously filed

Important! To change the LLC addresses, or to change the name or address of the LLC's agent for service of process, you must file a Statement of Information (Form LLC-12). To get Form LLC-12, go to www.sos.ca.gov/business/be/statements.htm

Note: Before submitting the completed form, you should consult with a private attorney for advice about your specific business needs

This Space For Office Use Only

For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm.

1 LLC's Exact Name (on file with CA Secretary of State)
Mosaic International LLC

2 LLC File No. (issued by CA Secretary of State)
200908410263

New LLC Name (Only complete Item 3 if you are changing the name of your LLC.)

3 LE Holdings LLC
Proposed LLC Name

The name must end with, "LLC," "LLC," "Limited Liability Company," "Limited Liability Co.," "Ltd. Liability Co." or "Ltd. Liability Company," and may not include "bank," "trust," "trustee," "incorporated," "inc.," "corporation," or "corp.," "insurer," or "insurance company."

Purpose

4 The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the Beverly-Killea Limited Liability Company Act.

LLC Addresses (If the LLC has not filed a Statement of Information (Form LLC-12), list the addresses exactly as listed in the original articles of organization. If the LLC has filed Form LLC-12, do not complete Item 5.)

5 a. Initial Street Address of LLC City (no abbreviations) State Zip
b. Initial Mailing Address of LLC, if different from 5a City (no abbreviations) State Zip

Service of Process (If the LLC has not filed a Statement of Information (Form LLC-12), list the name and address of the agent for service of process exactly as listed in the original articles of organization. If the LLC has filed Form LLC-12, do not complete Item 6.)

6 a. Agent's Name
b. Agent's Street Address (if agent is not a corporation) City (no abbreviations) State Zip CA

Management (Check only one)

7 The LLC will be managed by.
[checked] One Manager [] More Than One Manager [] All Limited Liability Company Member(s)

Read and sign below: This form must be signed by at least one manager, unless a greater number is provided for in the Articles of Organization. If a trust, association, attorney-in-fact, or any other person not listed above is signing, go to www.sos.ca.gov/business/be/filing-tips.htm for more information. If you need more space, attach extra pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All attachments are part of this document.

Mia Minnelli
Sign here Print your name here Manager Your business title

Make check/money order payable to: Secretary of State
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.
By Mail Secretary of State Business Entities, P.O. Box 944228 Sacramento, CA 94244-2280
Drop-Off Secretary of State 1500 11th Street., 3rd Floor Sacramento, CA 95814