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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM537931

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Powerful Men LLC		12/26/2017	Limited Liability Company: FLORIDA

RECEIVING PARTY DATA

Name:	Powerful Foods LLC
Street Address:	429 Lenox Ave.
City:	Miami Beach
State/Country:	FLORIDA
Postal Code:	33139
Entity Type:	Limited Liability Company: FLORIDA

PROPERTY NUMBERS Total: 9

Property Type	Number	Word Mark
Serial Number:	87273322	POWERFUL
Serial Number:	87380079	POWERFUL DRINK
Registration Number:	4539286	FIND YOUR INNER ABS
Registration Number:	4822535	BROGURT
Registration Number:	5459912	POWERFUL DRINK
Registration Number:	5597252	POWERFUL SMOOTHIE
Registration Number:	5438386	POWERFUL OATMEAL
Registration Number:	5438387	POWERFUL OATMEAL
Registration Number:	5840310	POWERFUL SMOOTHIE

CORRESPONDENCE DATA

Fax Number: 3058580008

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: 3058588000

Email: msantana@malloylaw.com
Correspondent Name: Meredith Frank Mendez, Esq.

Address Line 1: 2800 S.W. 3rd Avenue
Address Line 4: Miami, FLORIDA 33129

NAME OF SUBMITTER: Meredith Frank Mendez

SIGNATURE:	/Meredith Frank Mendez/
DATE SIGNED:	08/22/2019
Total Attachments: 5	
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(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Au	aress)	
(Cit	y/State/Zip/Phone	#)
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COVER LETTER

Division of C			
	Men LLC		
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	•
Please return all corres	oondence concerning this matter	to the following:	
	Carlos Ramirez		
		Name of Person	
	Powerful Men LLC		
		Firm/Company	
	429 Lenox Ave		
	T	Address	
	Miami Beach, FL 33138		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	carlos@powerful.yt	to be used for future annual report not	ification)
For further information	concerning this matter, please c	·	
Daniela Koch / Reinale	do Martinez	305 779-2449 E	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	© \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi	LING ADDRESS: stration Section ion of Corporations	STREET/COUR Registration Secti Division of Corpo	on

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, Fl. 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Powerful Men LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 02/28/2012	and assigned
Florida document number 1.12000028652		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Powerful Foods LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable:	429 Lenox Ave.	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33139	
Enter new mailing address, if applicable:	429 Lenox Ave.	
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	Miami Beach, FL 33139	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>enter the</u>	SEGRETARY OF COR
Name of New Registered Agent:		- 2 85
New Registered Office Address:	Enter Florida street address	Albu
	. Florida	, η
- 17 17 1		o Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Address** <u>Title</u> **Name** Type of Action _□ Add □ Remove __ Change __ 🗖 Remove _□ Change _____ □ Remove _____ □ Change _□ Add □ Remove □ Add ☐ Remove _ Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	ry.)	
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Effective date, if other than the date of filing:	g.) Pursuant to 605	5.0207 ed as
he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. The 90th day after the record is filed.	on the earli	er of
Dated December 26th 2017	18 JAN	AISION C
	-2)F (108)
Signature of a member or authorized representative of a member	3	POR A
Carlos Ramirez Typed or printed name of signee	23	KOLL.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

TRADEMARK **REEL: 006727 FRAME: 0896**

RECORDED: 08/23/2019