

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

ETAS ID: TM538101

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
MedAssets Net Revenue Systems, LLC		07/07/2016	Limited Liability Company:
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	nThrive Revenue Systems, LLC		
<b>Street Address:</b>	200 North Point Center East, Suite 600		
<b>City:</b>	Alpharetta		
<b>State/Country:</b>	GEORGIA		
<b>Postal Code:</b>	30022		
<b>Entity Type:</b>	Limited Liability Company: DELAWARE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	2276562	HARVEST	
<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>	alhanson@nthrive.com		
<b>Correspondent Name:</b>	Alexandra Hanson		
<b>Address Line 1:</b>	200 North Point Center East, Suite 600		
<b>Address Line 4:</b>	Alpharetta, GEORGIA 30022		
<b>NAME OF SUBMITTER:</b>	Alexandra Hanson		
<b>SIGNATURE:</b>	/Alexandra Hanson/		
<b>DATE SIGNED:</b>	08/26/2019		
<b>Total Attachments: 2</b>			
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OP \$40.00 2276562

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "MEDASSETS NET REVENUE SYSTEMS, LLC", CHANGING ITS NAME FROM "MEDASSETS NET REVENUE SYSTEMS, LLC" TO "NTHRIVE REVENUE SYSTEMS, LLC", FILED IN THIS OFFICE ON THE SEVENTH DAY OF JULY, A.D. 2016, AT 4:32 O`CLOCK P.M.



Jeffrey W. Bullock, Secretary of State

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SR# 20164818437

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202622097  
Date: 07-07-16

**TRADEMARK**  
**REEL: 006728 FRAME: 0736**

**STATE OF DELAWARE**  
**CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: \_\_\_\_\_  
MedAssets Net Revenue Systems, LLC

2. The Certificate of Formation of the limited liability company is hereby amended  
as follows:

The name of the limited liability company is nThrive  
Revenue Systems, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 7th day of July, A.D. 2016.

By:   
Authorized Person(s)

Name: Daniel J. Mulligan  
Print or Type