

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM544608

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
BREATHE EASY INSURANCE SOLUTIONS, LP		02/22/2019	Limited Partnership: CALIFORNIA
RECEIVING PARTY DATA			
Name:	BREATHE EASY INSURANCE SOLUTIONS, LLC		
Street Address:	23181 VERDUGO ST		
Internal Address:	STE 101		
City:	LAGUNA HILLS		
State/Country:	CALIFORNIA		
Postal Code:	92653		
Entity Type:	Limited Liability Company: CALIFORNIA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	5725640	BE BREATHE EASY INSURANCE	
Registration Number:	5725691	BREATHE EASY INSURANCE SOLUTIONS	
CORRESPONDENCE DATA			
Fax Number:	2124464900		
<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>			
Email:	susan.zablocki@kirkland.com		
Correspondent Name:	SUSAN ZABLOCKI		
Address Line 1:	KIRKLAND & ELLIS LLP		
Address Line 2:	601 LEXINGTON AVENUE		
Address Line 4:	NEW YORK, NEW YORK 10022		
ATTORNEY DOCKET NUMBER:	43253-3		
NAME OF SUBMITTER:	Susan Zablocki		
SIGNATURE:	/susan zablocki/		
DATE SIGNED:	10/10/2019		
Total Attachments: 1			
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CH \$65.00 5725640



**State of California
Secretary of State**

**Limited Liability Company
Articles of Organization - Conversion**

LLC-1A File #

201906710004

201528100004

FILED AG
Secretary of State
State of California

FEB 22 2019

IMPORTANT -- Read all instructions before completing this form.

This Space For Filing Use Only

ICC

Converted Entity Information

1. Name of Limited Liability Company (The name must include the words Limited Liability Company or the abbreviations LLC or L.L.C. The words Limited and Company may be abbreviated to Ltd. and Co., respectively.)

Breathe Easy Insurance Solutions, LLC

2. 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 California Revised Uniform Limited Liability Company Act.

3. The limited liability company will be managed by (check only one):

One Manager More Than One Manager All Limited Liability Company Member(s)

4. Initial Street Address of Limited Liability Company's Designated Office in CA City State Zip Code
23181 VERDUGO STE 101 LAGUNA HILLS CA 92653

5. Initial Mailing Address of Limited Liability Company, if different from Item 4 City State Zip Code

6. Initial Agent for Service of Process: Item 6a: List the name of an individual or a corporation registered in CA under California Corporations Code section 1505 that agrees to be your agent for service of process. You may not list the converted entity as the agent. Item 6b: If the agent is an individual, list the agent's CA business or residential street address. Item 6c: If the agent is an individual and the converting entity is a CA corporation, limited partnership or general partnership, list the the agent's mailing address. Do not list an address if the agent is a CA registered corporate agent as the address for service of process is already on file.

a. Name of Agent For Service of Process *Which will do business in California as*
Corporation Service Company *CSC-Lawyers Incorporating Service*

b. If an Individual, Street Address of Agent for Service of Process - Do not list a P.O. Box City State Zip Code
CA

c. If an Individual, Mailing Address of Agent for Service of Process City State Zip Code

Converting Entity Information

7. Name of Converting Entity
BREATHE EASY INSURANCE SOLUTIONS, LP

8. Form of Entity 9. Jurisdiction 10. CA Secretary of State File Number, If any
Limited Partnership California 201528100004

11. The principal terms of the plan of conversion were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required. If a vote was required, the following was required for each class:

The class and number of outstanding interests entitled to vote. AND The percentage vote required of each class.
1 General Partner 100% of General Partner
1 Limited Partner 100% of Limited Partner

Additional Information

12. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.

13 I certify under penalty of perjury that the contents of this document are true. I declare I am the person who executed this instrument, which execution is my act and deed

Shannon Woods
Signature of Authorized Person

Shannon Woods, VP of Breathe Easy
Type or Print Name and Title of Authorized Person

Insurance LLC, the GP of Breathe Easy Insurance Solutions, LP
Signature of Authorized Person Type or Print Name and Title of Authorized Person