OP \$140.00 5762900

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM549765

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Epoxies, Inc.		08/16/2019	Corporation: RHODE ISLAND

RECEIVING PARTY DATA

Name:	Epoxies, LLC
Street Address:	21 Starline Way
City:	Cranston
State/Country:	RHODE ISLAND
Postal Code:	02921
Entity Type:	Limited Liability Company: DELAWARE

PROPERTY NUMBERS Total: 5

Property Type	Number	Word Mark
Registration Number:	5762900	TRIGGERBOND
Registration Number:	3660170	ILLUMABOND
Registration Number:	5021113	FREEZEBOND
Registration Number:	3829582	EPOXIES ETC. INNOVATIVE BONDING SOLUTION
Registration Number:	2231723	TRIGGER BOND

CORRESPONDENCE DATA

Fax Number: 2163634588

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: 2163634677

Email: dpoirier@beneschlaw.com

Correspondent Name: Duncan H. Poirier

Address Line 1: Benesch Friedlander Coplan & Aronoff LLP

Address Line 2: 200 Public Square, Suite 2300

Address Line 4: Cleveland, OHIO 44114

ATTORNEY DOCKET NUMBER:	49535.21
NAME OF SUBMITTER:	Duncan H. Poirier
SIGNATURE:	/Duncan H. Poirier/
DATE SIGNED:	11/18/2019

Total Attachments: 4

source=EPOXIES LLC - DE - CONVERSION CERTIFICATE#page1.tif

source=EPOXIES LLC - DE - CONVERSION CERTIFICATE#page2.tif

source=EPOXIES LLC - DE - CONVERSION CERTIFICATE#page3.tif

source=EPOXIES LLC - DE - CONVERSION CERTIFICATE#page4.tif





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 CONVERSION OF A RHODE ISLAND

CORPORATION UNDER THE NAME OF "EPOXIES, INC." TO A DELAWARE

LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "EPOXIES, INC."

TO "EPOXIES LLC", FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF

AUGUST, A.D. 2019, AT 4:43 O'CLOCK P.M.

7564807 8100F SR# 20196566731

You may verify this certificate online at corp.delaware.gov/authver.shtml

Juntan in Branch personal in gene

Authentication: 203426526

Date: 08-16-19

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:43 PM 08/16/2019
FILED 04:43 PM 08/16/2019
SR 20196566731 - File Number 7564807

STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A CORPORATION TO A LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY ACT

1.)	The jurisdiction where the Corporation first formed is Rhode Island .
2.)	The jurisdiction immediately prior to filing this Certificate is Rhode Island.
3.)	The date the corporation first formed is February 16, 2006
4.)	The name of the Corporation immediately prior to filing this Certificate is Epoxles, Inc.
5.)	The name of the Limited Liability Company as set forth in the Certificate of Formation is Epoxies LLC
IN	WITNESS WHEREOF, the undersigned have executed this Certificate on the
	By: Michael Authorized Person (
	Name-Michael A. Harrington, President

TRADEMARK REEL: 006797 FRAME: 0666

Print or Type





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "EPOXIES LLC"
FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF AUGUST, A.D.
2019, AT 4:43 O'CLOCK P.M.

7564807 8100F SR# 20196566731

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203426526 Date: 08-16-19

STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

irst: The name of the limited liabilit	y company îs Epoxies LLC
econd: The address of its registered 850 New Burton Road, Suite 201	office in the State of Delaware isin the City ofover
Zip Code 19904	The and different first in the bridge of the state of the
The name of its Registered agent at	such address is Cogency Global Inc.
hird: (Insert any other matters the m	sembers determine to include herein.)
	47767 1.114 1.014 1.14 1.144 1.144 1.144 1.144 1.144 1.144 1.144 1.144 1.144 1.144 1
With an Will areas the mideral model	have executed this Certificate of Formation this
tora /	1019
	By: Willar 2/
	Authorized Person(s)
	Name: Michael A. Harrington
	Typed or Printed

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:43 PM 08/16/2019
FILED 04:43 PM 08/16/2019
SR 20196566731 - File Number 7564807

RECORDED: 11/18/2019