

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM552343

<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>
Science First LLC		10/09/2018	Limited Liability Company: DELAWARE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Science Interactive Group LLC		
<b>Street Address:</b>	86475 Gene Lasserre Blvd.		
<b>City:</b>	Yulee		
<b>State/Country:</b>	FLORIDA		
<b>Postal Code:</b>	32034		
<b>Entity Type:</b>	Limited Liability Company: DELAWARE		
<b>PROPERTY NUMBERS Total: 14</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5146609	BECK	
<b>Registration Number:</b>	3723034	DAEDALON	
<b>Registration Number:</b>	2969416	SCIENCE FIRST	
<b>Registration Number:</b>	2703581	WILDLIFE SUPPLY COMPANY	
<b>Registration Number:</b>	1988528	SHIPEK	
<b>Registration Number:</b>	1948545	TURTOX	
<b>Registration Number:</b>	1907202	FIELDMASTER	
<b>Registration Number:</b>	1897492	LINX	
<b>Registration Number:</b>	1500367	THE SCIENCE SOURCE	
<b>Registration Number:</b>	1197153	STARLAB	
<b>Registration Number:</b>	0809653	STACO	
<b>Registration Number:</b>	0981582	PONAR	
<b>Registration Number:</b>	0956472	WILDSCO	
<b>Registration Number:</b>	0701779	TRIPPENSEE	
<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>			

CH \$365.00 5146609

**Email:** trademarks@pch-iplaw.com  
**Correspondent Name:** Michael B. Chesal  
**Address Line 1:** 2 South Biscayne Blvd., Suite 3700  
**Address Line 4:** Miami, FLORIDA 33131

**NAME OF SUBMITTER:** Michael B. Chesal, Attorney of Record

**SIGNATURE:** /mbc/

**DATE SIGNED:** 12/07/2019

**Total Attachments: 6**

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Division of Corporations

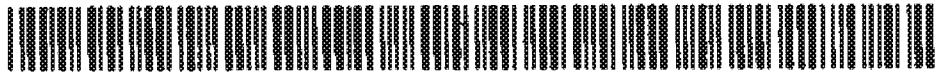
https://efile.sunbiz.org/scripts/efilecovr.ex

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

A/NC

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : PETER W. KLEIN, P.A.  
Account Number : 12016000023  
Phone : (361)232-2058  
Fax Number : (561)790-8434

2018 OCT 17 PM 9:12

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: wjohansson@scienceinteractive.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SCIENCE FIRST LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

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2018 OCT 17 PM 11:29

Electronic Filing Menu

Corporate Filing Menu

Help

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: SCIENCE FIRST LLC

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M16000007878

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: OCTOBER 3, 2016

## SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: SCIENCE INTERACTIVE GROUP LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida Street Address

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

\_\_\_\_\_

Title/Capacity	Name	Address	Type of Action
CEO	Timothy B. Loomer	86475 Gene Lasserre Blvd., Yulee, FL 32034	<input checked="" type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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 10/17/18

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Timothy B. Loomer*

Signature of the authorized representative

TIMOTHY B. LOOMER

Typed or printed name of signee

Filing Fee: \$25.00

# Delaware The First State

Page 1

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 "SCIENCE FIRST LLC", CHANGING ITS NAME FROM "SCIENCE FIRST LLC" TO "SCIENCE INTERACTIVE GROUP LLC", FILED IN THIS OFFICE ON THE NINTH DAY OF OCTOBER, A.D. 2018, AT 12:20 O'CLOCK P.M.

RECEIVED  
SECRETARY OF STATE  
9AM OCT 17 PM 9:42



*Jeffrey W. Bullock*  
Jeffrey W. Bullock, Secretary of State

6152281 8100  
SR# 20187049931

Authentication: 203578050  
Date: 10-09-18

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

**TRADEMARK**  
**REEL: 006810 FRAME: 0835**

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 12:20 PM 10-09-2018  
FILED 12:20 PM 10-09-2018

SR 20187049931 - File Number 6151281

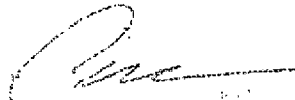
### STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: \_\_\_\_\_  
SCIENCE FIRST LLC

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

The name of the Limited Liability Company:  
Science Interactive Group LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 9th day of October, A.D. 2018

By:   
Authorized Person(s)

Name: Peter W. Klein  
Print or Type

# Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCIENCE INTERACTIVE GROUP LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

9918 OCT 17 PM 9:42



*JWB*  
Jeffrey W. Bullock, Secretary of State

6152281 8300

SR# 20187059631

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

Authentication: 203578157

Date: 10-09-18