

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM580837

SUBMISSION TYPE:	RESUBMISSION		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
RESUBMIT DOCUMENT ID:	900546260		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
SignatureA LLC		09/29/2017	Limited Liability Company:
RECEIVING PARTY DATA			
Name:	Signature A LLC		
Street Address:	20 Hurlbut Street		
City:	West Hartford		
State/Country:	CONNECTICUT		
Postal Code:	06110		
Entity Type:	Limited Liability Company: CONNECTICUT		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Serial Number:	87982881	BARE LIFE	
Serial Number:	87627820	BARE LIFE	
CORRESPONDENCE DATA			
Fax Number:			
<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>			
Phone:	8605705025		
Email:	iplawclinic@uconn.edu		
Correspondent Name:	Kathleen Lombardi		
Address Line 1:	45 Elizabeth Street		
Address Line 4:	Hartford, CONNECTICUT 06105		
NAME OF SUBMITTER:	Kathleen Lombardi		
SIGNATURE:	/kathleen lombardi/		
DATE SIGNED:	06/11/2020		
Total Attachments: 0			

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