

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM580940

<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>
TutorMe.com, LLC		06/07/2019	Limited Liability Company: CALIFORNIA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	TUTORME, LLC		
<b>Street Address:</b>	1811 E. Northrop Blvd.		
<b>City:</b>	Chandler		
<b>State/Country:</b>	ARIZONA		
<b>Postal Code:</b>	85286		
<b>Entity Type:</b>	Limited Liability Company: CALIFORNIA		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5635852	TUTORME	
<b>Registration Number:</b>	5209960	TUTORME	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	7145135130		
<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>Phone:</b>	714) 513-5100		
<b>Email:</b>	ipdocketingtm@sheppardmullin.com		
<b>Correspondent Name:</b>	Sheppard MullinRichter & Hampton LLP		
<b>Address Line 1:</b>	650 Town Center Drive, 10th Floor		
<b>Address Line 4:</b>	Costa Mesa, CALIFORNIA 92626		
<b>NAME OF SUBMITTER:</b>	Brian M. Daucher		
<b>SIGNATURE:</b>	/BMD/		
<b>DATE SIGNED:</b>	06/12/2020		
<b>Total Attachments: 3</b>			
source=Amendment to Articles of Organization#page1.tif			
source=Statement of Information (Limited Liability Company#page1.tif			
source=Statement of Information (Limited Liability Company#page2.tif			

CH \$65.00 5635852



**Secretary of State  
Amendment to Articles of  
Organization of a  
Limited Liability Company (LLC)**

LLC-2

**FILED**  
Secretary of State  
State of California

JUN 07 2019

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**IMPORTANT — Read Instructions before completing this form.**

**Filing Fee** - \$30.00

**Copy Fees** - First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00

**Note:** You must file a Statement of Information (Form LLC-12), to change the business address(es) of the LLC or to change the name or address of the LLC's manager(s) and/or agent for service of process, which can be filed online at [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).

**1. LLC Exact Name** (Enter the exact name on file with the California Secretary of State.)

Tutorme.com, LLC

**2. LLC 12-Digit Entity (File) Number** (Enter the exact 12-digit Entity (File) Number issued by the California Secretary of State.)

2	0	1	9	0	8	5	1	0	7	1	2
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**3. New LLC Name (If Amending)** (See Instructions – List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State. The name must contain an LLC identifier such as LLC or L.L.C. "LLC" will be added, if not included.)

TutorMe, LLC

**4. Management (If Amending)** (Select **only** one box)

The LLC will be managed by:

One Manager       More than One Manager       All LLC Member(s)

**5. Purpose Statement** (Do not alter Purpose Statement.)

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.

**6. Additional Amendment(s)** set forth on attached pages, if any, are incorporated herein by reference and made part of this Form LLC-2. (All attachments should be 8½ x 11, one-sided, legible and clearly marked as an attachment to this form LLC-2.)

**Signature**

By signing, I certify that the information is true and correct and that I am authorized by California law to sign.

**Andrew Clark**

Sign here

Print your name here





**Attachment to  
Statement of Information  
(Limited Liability Company)**

**LLC-12A  
Attachment**

19-C41439

**A. Limited Liability Company Name**

TUTORME, LLC

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**B. 12-Digit Secretary of State File Number**

201908510712

**C. State or Place of Organization (only if formed outside of California)**

CALIFORNIA

**D. List of Additional Manager(s) or Member(s) - If the manager/member is an individual, enter the individual's name and address. If the manager/member is an entity, enter the entity's name and address. Note: The LLC cannot serve as its own manager or member.**

First Name Andrew	Middle Name	Last Name Clark	Suffix
Entity Name			
Address 1811 E. Northrop Blvd.	City (no abbreviations) Chandler	State AZ	Zip Code 85286
First Name Gregory	Middle Name	Last Name Finkelstein	Suffix
Entity Name			
Address 1811 E. Northrop Blvd.	City (no abbreviations) Chandler	State AZ	Zip Code 85286
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
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First Name	Middle Name	Last Name	Suffix
Entity Name			
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First Name	Middle Name	Last Name	Suffix
Entity Name			
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First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code