

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM587639

SUBMISSION TYPE:	RESUBMISSION		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
RESUBMIT DOCUMENT ID:	900552297		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
YukBGone Acquisition, LLC		03/23/2020	Limited Liability Company: DELAWARE
RECEIVING PARTY DATA			
Name:	YukBGone, LLC		
Street Address:	15 N. Southwood Dr.		
City:	Nashua		
State/Country:	NEW HAMPSHIRE		
Postal Code:	03063		
Entity Type:	Limited Liability Company: DELAWARE		
PROPERTY NUMBERS Total: 4			
Property Type	Number	Word Mark	
Serial Number:	88618283		
Serial Number:	88725047		
Serial Number:	88725034	YUKBGONE	
Registration Number:	5485113	YUKBGONE	
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:	9784639100		
Email:	trademarks@sandsip.com		
Correspondent Name:	Matthew Saunders		
Address Line 1:	14 Cedar Street		
Address Line 2:	Suite 224		
Address Line 4:	Amesbury, MASSACHUSETTS 01913		
NAME OF SUBMITTER:	Matthew Saunders		
SIGNATURE:	/matthew saunders/		
DATE SIGNED:	07/21/2020		
Total Attachments: 3			

source=Name Change YukBGone Acquisition to YukBGone LLC - State of Delaware cert. of amendment#page1.tif
source=Name Change YukBGone Acquisition to YukBGone LLC - State of Delaware cert. of amendment#page2.tif
source=Name Change YukBGone Acquisition to YukBGone LLC - State of Delaware cert. of amendment#page3.tif

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: YukBGone Acquisition, LLC —

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

The name of the limited liability company is
YukBGone, LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on
the 23RD of March, A.D. 2020.

By: 

Authorized Person(s)

Name: DEBORAH ADAMS

Print or Type



**Delaware
Division of
Corporations**

Division of Corporations Survey

401 Federal Street, Suite 4
Dover, DE 19901

Fax: 302-739-7219

On a scale of 1 (unacceptable) to 10 (outstanding), please rate the following questions.

1. How would you rate the overall quality of service provided by the Division of Corporations?
1 2 3 4 5 6 7 8 9 10 NA
2. How would you rate the convenience of our services?
1 2 3 4 5 6 7 8 9 10 NA
3. How would you rate the promptness of service provided?
1 2 3 4 5 6 7 8 9 10 NA
4. How would you rate the accessibility of the Division of Corporations staff?
1 2 3 4 5 6 7 8 9 10 NA
5. How would you rate the training/information you received from the Division of Corporations staff?
1 2 3 4 5 6 7 8 9 10 NA
6. How would you rate the written materials received from the Division of Corporations?
(Were they easy to read and helpful? i.e., guidelines, forms, DCIS Manual.)
1 2 3 4 5 6 7 8 9 10 NA
7. Were Division of Corporations staff attentive and helpful relative to your comments and concerns?
1 2 3 4 5 6 7 8 9 10 NA
8. Did Division of Corporations staff display professionalism & courtesy?
1 2 3 4 5 6 7 8 9 10 NA
9. Are Division of Corporations staff knowledgeable?
1 2 3 4 5 6 7 8 9 10 NA

Please let us know about experiences and incidents with the Division of Corporations (i.e., staff, equipment, connectivity, customer service) that impressed or disappointed you.

Comments: _____

Company name and contact information: _____

If you would prefer, you may take this survey online at

<https://surveymonkey.com/r/corporationssurvey>

TRADEMARK