# TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM605260

| SUBMISSION TYPE: | NEW ASSIGNMENT |
|------------------|----------------|
|------------------|----------------|

**NATURE OF CONVEYANCE: ENTITY CONVERSION** 

### **CONVEYING PARTY DATA**

| Name                  | Formerly | Execution Date | Entity Type          |
|-----------------------|----------|----------------|----------------------|
| IndustrySafe IP, Inc. |          | 07/10/2019     | Corporation: FLORIDA |

### **RECEIVING PARTY DATA**

| Name:           | IndustrySafe IP, LLC               |
|-----------------|------------------------------------|
| Street Address: | 107 Terra Linda PI.                |
| City:           | Palm Beach Gardens                 |
| State/Country:  | FLORIDA                            |
| Postal Code:    | 33418                              |
| Entity Type:    | Limited Liability Company: FLORIDA |

### **PROPERTY NUMBERS Total: 2**

| Property Type        | Number  | Word Mark    |
|----------------------|---------|--------------|
| Registration Number: | 3041778 | TRANSITSAFE  |
| Registration Number: | 3046170 | INDUSTRYSAFE |

### CORRESPONDENCE DATA

Fax Number: 8132270498

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: 813-227-7401

Email: mmason@trenam.com **Correspondent Name:** Monica B. Mason, Esq. Address Line 1: 101 E. Kennedy Blvd.

Address Line 2: **Suite 2700** 

Address Line 4: Tampa, FLORIDA 33602

| NAME OF SUBMITTER: | Monica B. Mason, Esq. |
|--------------------|-----------------------|
| SIGNATURE:         | /monica b. mason/     |
| DATE SIGNED:       | 10/27/2020            |

### **Total Attachments: 6**

source=Conversion INDUSTRYSAFE (IP, INC. to LLC)#page1.tif source=Conversion INDUSTRYSAFE (IP, INC. to LLC)#page2.tif source=Conversion INDUSTRYSAFE (IP, INC. to LLC)#page3.tif source=Conversion INDUSTRYSAFE (IP, INC. to LLC)#page4.tif

> **TRADEMARK** REEL: 007087 FRAME: 0955

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# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address
New Filing Section
Division of Corporations
P. O. Box 6327

Tallahassee, FL 32314

**Street Address** 

New Filing Section
Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

# COVER LETTER

| <b>TO:</b> New Filing So Division of C   |  |                                   |           |  |
|--|--|-----------------------------------|-----------|--|
|  | 1  |                                   |           |  |
| SUBJECT: Industry S  |  |                                   |           |  |
|  | (Name of Res   | ulting Florida Limit              | ed Con    | npany)   |
|  |  | •                                 |           | d fees are submitted to convert an "Other coordance with s. 605.1045, F.S. |
| Please return all corre  | espondence concerning                                | g this matter to:                 |           |  |
| Dawn L. Hall, Paralegal  |  |                                   |           |  |
|  | (Contact Person)                                     |                                   |           |  |
| Pepper Hamilton LLP  |  |                                   |           |  |
|  | (Firm/Company)                                       |                                   |           |  |
| 400 Berwyn Park  |  |                                   |           |  |
|  | (Address)  |                                   |           |  |
| Berwyn, PA 19312   |  |                                   |           |  |
| ((   | City, State and Zip Code)                            |                                   |           |  |
| halld@pepperlaw.com  |  |                                   | _         |  |
| E-mail Address: (to b  | e used for future annual rej                         | port notifications)               |           |  |
| For further information  | on concerning this ma                                | tter, please call:                |           |  |
| Dawn L. Hall   |  | et (610                           | \ 640-5   | 435  |
| (Name of Conta   | ct Person)   | (Area Code)                       | )<br>(Day | time Telephone Number)   |
|  | or the following amou<br>a bank located in the       | ,                                 | rocess    | sed by this office must be payable in US                                   |
| \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | \$155.00 Filing Fees<br>and Certificate of<br>Status | \$180.00 Filing and Certified Cop |           | \$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status      |
| STREET ADDRESS   | S:   | MAIL                              | ING A     | DDRESS:  |
| New Filing Section   |  | New Fi                            |           |  |
| Division of Corporati<br>Clifton Building  | ions   | Divisio<br>P. O. B                |           | orporations<br>27  |
| 2661 Executive Cent  | er Circle  |                                   |           | FL 32314   |

INHS11 (7/17)

Tallahassee, FL 32301

### **Articles of Conversion**

For

# "Other Business Entity"

Into

# Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Industry Safe IP, Inc.                                    |
|--|
| (Enter Name of Other Business Entity)  |
| 2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc. |
| First organized, formed or incorporated under the laws of  |
| on 12/01/2017 (date of organization, formation or incorporation)   |
| 3. The name of the Florida Limited Liability Company as set forth in the <b>attached Articles of Organization</b> IndustrySafe IP, LLC                                 |
| (Enter Name of Florida Limited Liability Company)  |
| <ol> <li>If not effective on the date of filing, enter the effective date:</li></ol>   |

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

| Signed              | this <u>10th day of</u>                                | July               | 20                 | 19        | <u>. Signature of</u>        |
|---------------------|--|--------------------|--------------------|-----------|------------------------------|
| Author              | ized Representativ                                     | ve of Limited L    | iability C         | ompan     | <u>y:</u>                    |
| Cionatu             | ra of Authorized De                                    | haracantativa: k   | emeth A.           | Koracli   |                              |
| Printed 3           | re of Authorized Re<br>Name: <u>Ken Korach</u>         | epresemanve: _     |                    | Title:    | President                    |
|                     |  |                    |                    |           |                              |
| <u>Signatu</u>      | re(s) on behalf of C                                   | Other Business 1   | Entity: [S         | ee belov  | v for required signature(s)] |
| Signatur            | re: Kenneth A. Korach                                  |                    |                    |           |                              |
| Printed 1           | Name: Ken Korach                                       |                    |                    | Title: P  | resident and Director        |
|                     |  |                    |                    |           |                              |
| Signatur            | re:  |                    |                    | m: 1      |                              |
| Printed .           | Name:  |                    |                    | Title: _  |                              |
| Signatur            | re:  |                    |                    |           |                              |
| Printed 1           | Name:  |                    |                    | Title: _  |                              |
|                     |  |                    |                    |           |                              |
| Signatui            | re:  |                    |                    | Title     |                              |
| Printed .           | name:  |                    |                    | Title: _  |                              |
| Signatui            | re:  |                    |                    |           |                              |
| Printed 1           | Name:  |                    |                    | Title: _  |                              |
| Cianatus            | •••  |                    |                    |           |                              |
| Signatur<br>Printed | re:<br>Name:   |                    |                    | Title     |                              |
| Timea               | · (uiiio   |                    |                    | THE       |                              |
|                     | da Corporation:  |                    |                    |           |                              |
| _                   | re of Chairman, Vice                                   |                    |                    |           | , .                          |
| If Direct           | tors or Officers have                                  | e not been selecte | ea, an Inco        | rporator  | must sign.                   |
| If Flori            | da General Partner                                     | ship or Limited    | l Liability        | Partne    | rship:                       |
|                     | re of one General Pa                                   |                    |                    |           |                              |
| TO TELL             | 1. T ''4. 1 D4   |                    | LT * . L *1*4      | T         | I D. 4                       |
|                     | <b>da Limited Partner</b><br>res of <b>ALL</b> General | _                  | <u>ı Liability</u> | Limited   | <u>a Partnersnip:</u>        |
| Signatui            | es of <u>FREE</u> General                              | rancis.            |                    |           |                              |
| All othe            |  |                    |                    |           |                              |
| Signatui            | re of an authorized p                                  | erson.             |                    |           |                              |
| Fees:               |  |                    |                    |           |                              |
|                     | Articles of Convers                                    | ion:               |                    | \$25.00   |                              |
|                     | Fees for Florida Art                                   |                    |                    | \$125.00  | )                            |
| •                   | Certified Copy:  | _                  |                    |           | (Optional)                   |
| •                   | Certificate of Status                                  | s:                 |                    | \$5.00 (0 | Optional)                    |

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |  |
|--|--|
| The name of the Limited Liability Company is   | S:   |
|  |  |
| Industry Safe IP, LLC  |  |
| (Must contain the words "Limited Liabil  | ity Company, "L.L.C.," or "LLC.")  |
| ARTICLE II - Address:  |  |
| The mailing address and street address of the p  | principal office of the Limited Liability Company is:  |
| Principal Office Address:  | Mailing Address:   |
| 107 TERRA LINDA PL.  | 107 TERRA LINDA PL.  |
| PALM BEACH GARDENS, FL 33418   | PALM BEACH GARDENS, FL 33418   |
|  |  |
| ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)  The name and the Florida street address of the | stered Agent. You must designate an individual or another  |
|  |  |
| <u>C T CORPORATION SYSTEM</u><br>Nam   | <del></del>  |
| ivan   | ie   |
| 1200 SOUTH PINE ISLAND R   | ***************************************  |
| Florida street address (P.G  | O. Box <u>NOT</u> acceptable)  |
| PLANTATION   | FL 33324   |
| City   | FL 33324 Zip   |
| liability company at the place designated in registered agent and agree to act in this capa statutes relating to the proper and complete   | to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S |
| Registered Agent's Sig   | gnature (REQUIRED)   |
|  |  |

(CONTINUED)

## **ARTICLE IV-**

**RECORDED: 10/27/2020** 

The name and address of each person authorized to manage and control the Limited Liability Company:

| <u>Title:</u>  | Name and Address:   |
|--|---|
| "AMBR" = Authorized Member   |   |
| "MGR" = Manager  |   |
| AMBR   | IndustrySafe Holdings, Inc.   |
|  | 107 Terra Linda Pl.   |
|  | Palm Beach Gardens, FL 33418  |
|  |   |
|  |   |
|  |   |
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|  |   |
|  |   |
| (Use attachment if necessary)  |   |
| (Use attachment if necessary)  CLE V: Other provisions, if any.  |   |
|  |   |
| <b>LE V:</b> Other provisions, if any.   |   |
|  |   |
| LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Kenneth A. Korach  |   |
| REQUIRED SIGNATURE:  Kenneth A. Kornch  Signature of a member or a  This document is executed in accordance  | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor |
| REQUIRED SIGNATURE:  Kenneth A. Korach  Signature of a member or a  This document is executed in accordance any false information submitted in a document.                                   | with section 605.0203 (1) (b), Florida Statutes. I am aware that  |
| REQUIRED SIGNATURE:  Kenneth A. Korach  Signature of a member or a  This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. | with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felor   |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)