TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM612748

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	RELEASE OF SECURITY INTEREST
RESUBMIT DOCUMENT ID:	900576803

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
THREE LEAF VENTURES, LLC		10/21/2020	Limited Liability Company: COLORADO
ZAFFRE INVESTMENTS, LLC		10/21/2020	Limited Liability Company: MASSACHUSETTS
WOOLLY BUGGER II, LLC		10/21/2020	Limited Liability Company: DELAWARE

RECEIVING PARTY DATA

Name:	COHERO HEALTH, INC.	
Street Address:	12 E. 49th Street	
City:	New York	
State/Country:	NEW YORK	
Postal Code:	10017	
Entity Type:	Corporation: DELAWARE	

PROPERTY NUMBERS Total: 12

Property Type	Number	Word Mark
Registration Number:	4902330	COHEROHEALTH
Registration Number:	4765245	ASTHMAHERO
Registration Number:	5001187	BREATHE SMARTER
Registration Number:	5156786	BREATHESMART
Registration Number:	5125292	HEROTRACKER
Registration Number:	5228761	COHERO HEALTH
Registration Number:	5048033	COHERO HEALTH
Serial Number:	87732849	
Serial Number:	87732928	COHERO
Serial Number:	88255376	MSPIROMETER
Serial Number:	88255350	CSPIROMETER
Serial Number:	88357809	POWERED BY COHERO

CORRESPONDENCE DATA

TRADEMARK REEL: 007120 FRAME: 0645

900583997

Fax Number: 2037822889

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: 203.498.4347

Email: fduffin@wiggin.com

Correspondent Name: Francis J. Duffin, Wiggin and Dana LLP
Address Line 1: One Century Tower, 265 Church Street
Address Line 4: New Haven, CONNECTICUT 06510

NAME OF SUBMITTER: Francis J. Duffin

SIGNATURE: /fjd/

DATE SIGNED: | 12/07/2020

Total Attachments: 2

source=Corrected UCC Security Release WOOLLY BUGGER II LLC (UCC-5)#page1.tif

source=Cohero Release of Security Interest#page1.tif

TRADEMARK REEL: 007120 FRAME: 0646

CAUTIO This is no amendme	ot an
INFORMATION STATEMENT FOLLOW INSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional) Kathleen Ellison	
B. E-MAIL CONTACT AT FILER (optional) kellison@wiggin.com	Delaware Department of State U.C.C. Filing Section Filed A 14 PM 12 (942)20
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Kathleen Ellison, Paralegal Wiggin and Dana LLP 265 Church Street New Haven, CT 06510	Filed: 04:16 PM 12/04/2020 U.C.C. Initial Filing No: 2020 5363306 Amendment No: 2020 8512198 Service Request No: 20208564939
**************************************	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1. Identification of the RECORD to which this INFORMATION STATEMENT relates	
16 INITIAL FINANCING STATEMENT FILE NUMBER 20205363306 (Filed: August 4, 2020)	16. RECORD INFORMATION TO WHICH THIS INFORMATION STATEMENT RELATES 2020729799 (Filed: October 21, 2020) UCC-3 Termination
the manner in which the person believes the RECORD should be amended to or	Debtor of Record identified in Item 5 that the RECORD identified in Item 1 is inaccurate and indicate
2c. RECORD FILED BY PERSON NOT ENTITLED TO DO SO. Enter in it identified in item 1 was not entitled to do so under UCC Section 9-509	item 3 the basis for the belief by the Secured Party of Record that the person that filed the RECORD

3. Basis for claim of box checked in item 2.

Parties identified in Section 9a of the UCC-3 Termination, File Number: 2020729799, filed on October 21, 2020 at 8:19 a.m. are inaccurate.

The correct parties in Section 9a are: Three Leaf Ventures, LLC, Zaffre Investments, LLC and Woolly Bugger II, LLC.

4a. DATE	Ab. TIME		
August 4, 2020	6:18 p.m.		
Three Leaf Ventures, LLC, Zaffre	Investments, LLC and Woolly Bugger II, L	LC	
recovered mineral recommendates management as			
5b. INDIVIDUAL'S SURNAME.	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUEFD

UCC FINANCING STATEMENT AMENDMEN	Γ				
FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Kathleen Ellison		1	Delawaya Dan		4
B. E-MAIL CONTACT AT FILER (optional)	,	1	Delaware Dep U.C.C. Fi	arument of Sta ling Section	te
kellison@wiggin.com			Filed: 08:19	AM 10/21/2020	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			U.C.C. Initial Filin		
Kathleen Ellison, Paralegal			Amendment N Service Request		
Wiggin and Dana LLP	•		Service Request	TAGE TOPOSTAGE	3001
265 Church Street					
New Haven, CT 06510	1				
Assessing .		THE ABOVE SPACE	CE IS FOR FILING O	OFFICE USE OF	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20205363306 (Filed: August 4, 2020)		1b. This FINANCING STATEM (or recorded) in the REAL	ESTATE RECORDS		2.25
2. TERMINATION: Effectiveness of the Financing Statement identified above	is terminated v	Filer: <u>attach</u> Amendment Add	SANNON SANTATAN MAKAMENTAN MAKAMATAN MAKAMATAN MAKAMATAN MAKAMATAN MAKAMATAN MAKAMATAN MAKAMATAN MAKAMATAN MAK		
Statement		, , , , , , , , , , , , , , , , , , ,	,, .		
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b For partial assignment, complete items 7 and 9 and also indicate affected occurrence.			Assignor in item 9		
CONTINUATION: Effectiveness of the Financing Statement identified ab- continued for the additional period provided by applicable law	ove with respec	to the security interest(s) of Secu	rred Party authorizing	this Continuation	Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes: AND Check one	of these three b	oxes to:			
CHANC	GE name and/or a or 6b; <u>and</u> item	address: Complete ADD nam 7a or 7b <u>and</u> item 7c 7a or 7b,		DELETE name: Gi o be deleted in iter	
6. CURRENT RECORD INFORMATION: Complete for Party Information Change	je - provide only	one name (6a or 6b)	4		
6a. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	iai nakië	ADDITIONAL NAME(S	WINITIAL (S)	SUFFIX
do neovero de	I IIIO I I EIIOO	erne i verivite.	ADD/ TOTAL TRAINCIC	rymun mecoy.	0011 34
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	on Chance - provide	only one name (7e or 7b) (use exact, full sa	me: do not omit, modify, or at	breviate any part of th	ne Deblor's name)
78. ORGANIZATION'S NAME					
OB.					
OR 75, INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME	-			,iiii	
MUTTOURS) ING FEROUNE HARE					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			77.7		SUFFIX
				-	
7c. MAILING ADDRESS	CITY		STATE POSTAL CO	DDE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral R	ESTATE covered collat	eral AS	SIGN collateral
indicate collateral:					

	9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (8a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DESTOR, check here and provide name of authorizing Debtor					
	9a. ORGANIZATION'S NAME Three Leaf Ventures, LLC, Zaffre Investments, LI	C and Woolly Bugger, LLC		. Vir a vir a con de la labor se considera l'environi en considera l'environi en la considera l'environi en la		
OR:	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)INITIAL(S)	SUFFIX		

10. OPTIONAL FILER REFERENCE DATA: Filed with DE Secretary of State (Cohero Health, Inc.)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11) **RECORDED: 10/27/2020**

RÉEL: 007120 FRAME: 0648