900604006

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM633640

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
FoodScience Corporation		03/04/2021	Corporation: VERMONT

RECEIVING PARTY DATA

Name:	Foodscience, LLC
Street Address:	929 Harvest Lane
City:	Williston
State/Country:	VERMONT
Postal Code:	05495
Entity Type:	Limited Liability Company: VERMONT

PROPERTY NUMBERS Total: 55

Property Type	Number	Word Mark
Registration Number:	1516175	DAVINCI
Registration Number:	2523116	WHERE SCIENCE AND NATURE COME TOGETHER
Registration Number:	2439647	PET NATURALS
Registration Number:	2385204	VETRISCIENCE
Serial Number:	90133702	VETRISCIENCE
Registration Number:	2432880	FOODSCIENCE OF VERMONT
Registration Number:	2426266	FOODSCIENCE
Serial Number:	90216885	FOODSCIENCE
Registration Number:	2345763	DISCDISCOVERY
Registration Number:	2428088	PERNA
Registration Number:	2091217	GLYCOFLEX
Registration Number:	1200808	DAVINCI POTEN-C
Registration Number:	1154450	GLUCONIC
Registration Number:	2506502	THERMOSET
Registration Number:	2707822	JOINTAGEN
Registration Number:	2686316	GLYCOFLEX
Registration Number:	3095248	PET NATURALS
Registration Number:	4621092	VETRIFLEX
Registration Number:	4991164	G.I. BENEFITS
	ı	

TRADEMARK

REEL: 007229 FRAME: 0135

Property Type	Number	Word Mark
Registration Number:	5197655	COLOSTRUM CALMING COMPLEX
Registration Number:	6078802	COLOSTRUM CALMING COMPLEX
Registration Number:	5472605	HIP+JOINT PRO
Registration Number:	5235522	DERMA STRENGTH
Registration Number:	5778458	MEGA PROBIOTIC
Registration Number:	4466487	MEGA PROBIOTIC
Registration Number:	5505105	CALMING
Registration Number:	6010970	CALMING
Registration Number:	5534632	
Registration Number:	5534633	
Serial Number:	88087878	GAME ON
Registration Number:	5787634	SCALE DOWN
Registration Number:	5934061	PINCHERS
Serial Number:	88360618	EASY TO GIVE EASY TO TAKE
Serial Number:	88580530	PET NATURALS
Registration Number:	6120681	AMILEXTIN
Serial Number:	88830568	IMPAWSIBLY GOOD
Serial Number:	88840486	HEARTIBLES
Serial Number:	88962856	GI BALANCE PRO
Serial Number:	90083709	XSORB NUTRIENT DELIVERY SYSTEM
Serial Number:	90149011	MIGHTIEST VITE
Serial Number:	90141604	DAVINCI
Serial Number:	90136026	VETRISCIENCE LABORATORIES
Serial Number:	90201112	
Registration Number:	6258563	SENIOR SPECIFIC
Serial Number:	90226590	THE SCIENCE OF HEALTHY & HAPPY
Serial Number:	90380272	PROVAIL
Serial Number:	90382394	INNOVAIL
Serial Number:	90382390	MICROVAIL
Registration Number:	1142205	AANGAMIK
Registration Number:	2479506	CHITOLEAN
Registration Number:	2533296	MOUNTAIN NATURALS
Registration Number:	2379005	SUPERIOR CARE
Registration Number:	2407461	U.S. ANIMAL NUTRITIONALS
Registration Number:	2516264	DISCOVERY
Serial Number:	88530815	HISTAHEMP

CORRESPONDENCE DATA

TRADEMARK REEL: 007229 FRAME: 0136 **Fax Number:** 8028627512

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: 802-863-2375
Email: tmip@drm.com
Correspondent Name: William J. Morris III
Address Line 1: 199 Main Street

Address Line 4: Burlington, VERMONT 05401

ATTORNEY DOCKET NUMBER:	07790-210USG1
NAME OF SUBMITTER:	William J. Morris III
SIGNATURE:	/williamjmorris/
DATE SIGNED:	03/22/2021

Total Attachments: 5

source=2021-03-04 Foodscience, LLC Articles of Conversion (07790-210USG1)#page1.tif source=2021-03-04 Foodscience, LLC Articles of Conversion (07790-210USG1)#page2.tif source=2021-03-04 Foodscience, LLC Articles of Conversion (07790-210USG1)#page3.tif source=2021-03-04 Foodscience, LLC Articles of Conversion (07790-210USG1)#page4.tif source=2021-03-04 Foodscience, LLC Articles of Conversion (07790-210USG1)#page5.tif

TRADEMARK REEL: 007229 FRAME: 0137

STATE OF VERMONT OFFICE OF SECRETARY OF STATE

Certificate of Conversion

I, James C.Condos, Vermont Secretary of State, do hereby certify that FOODSCIENCE CORPORATION, a Vermont Domestic Profit Corporation converted to

FOODSCIENCE, LLC

a Vermont Domestic Limited Liability Company. As Filed in this department effective March 04, 2021



March 04, 2021

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital

James C. Condos

James C. Condos Secretary of State

Business ID: 0386165 Filing Number: 0002780623

TRADEMARK

Page 2 of 3



VERMONT SECRETARY OF STATE

Corporations Division

MAILING ADDRESS: Vermont Secretary of State, 128 State Street, Montpelier, VT 05633-1104
DELIVERY ADDRESS: Vermont Secretary of State, 128 State Street, Montpelier, VT 05633-1104
PHONE: 802-828-2386 WEBSITE: sos.vermont.gov

ARTICLES OF ORGANIZATION

FILING NUMBER: 0002780623

FILING DATE: 3/4/2021 EFFECTIVE DATE: 3/4/2021

BUSINESS INFORMATION	
BUSINESS ID	0386165
BUSINESS NAME	FOODSCIENCE, LLC
BUSINESS TYPE	Domestic Limited Liability Company
BUSINESS DESCRIPTION	31-Manufacturing 1999-All Other Miscellaneous Food Manufacturing
BUSINESS EMAIL	gwalter@foodsciencecorp.com

FISCAL YEAR END MONTH	
FISCAL YEAR END MONTH December	

DESIGNATED OFFICE BUSINESS ADDI	RESS		
STREET ADDRESS 92	9 Harvest Lane	CITY	Williston
STATE	Γ	ZIP CODE	05495
COUNTRY US	SA		

DESIGNATED OFFICE MAILING ADI	DRESS	
ADDRESS	929 Harvest Lane	CITY SWANTON
STATE	VT	ZIP CODE 05488
COUNTRY	USA	

MANAGEMENT STYLE

Member-Managed

MEMBERS INFORMATION

Does the LLC have members at the time of filing? Yes

AGENT INFORMATION		
NAME	PHYSICAL ADDRESS	MAILING ADDRESS
NATIONAL DEGISTEDED AGENTS	17 G W Tatro Dr, Jeffersonville, USA, 054649919,	17 G W Tatro Dr, Jeffersonville, USA, 054649919,
REGISTERED AGENTS, INC.	VT	VT

TRADEMARK Page 3 of 3 REEL: 007229 FRAME: 0139

Filed with the Vermont Secretary of State, Division of Corporations

		File No.:
		Business ID:
0.5	Vermont Secretary of State	
	STATEMENT OF CONVERSION	
- W	of a converting or converted Limited Liability Company (LLC, PLC, or L3C)	
1	RETURN ACKNOWLEDGEMENT TO: REQUIRED - NAME AND MAILING ADDRESS	
-An-	THE FORM ACTION CEDICINETY FO. REQUIRED - NAME AND MAILING ADDRESS	
	NAME	1.22.22.22.22
	ADORESS	VISOS-CORPS. DI
	7100771141	Processed by: 4 2021 001110
		FOR OFFICE USE ONLY
	THIS DOCUMENT MUST BE TYPEWRITTEN OR PRINTED (11A V	(.S.A. § 1.20)
2. Co a. b.	0060000	BE A CONVERTING OR CONVERTED ENTITY
с.	-	
٠.,	Vermont.	
	- A DOMESTIC CONVERTING ENTITY THAT IS NOT AN LLC MAY BECOME A FOREIGN OR DOMESTIC	CONVERTED H.C.
	- A DOMESTIC CONVERTING LLC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THA	AT IS NOT AN LLC.
	Acres the film of Comments were assessed to a second control of the	
	As such, the Plan of Conversion was approved in accordance with 11 V.S	s.A. Ch. 25, Subch. 10.
		s.A. Ch. 25, Subch. 10.
	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domes: (3) Effective Date of Conversion in Domestic State:	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
3 (1	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING LLC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State:	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING LIC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a.	Other: IF SELECTED - U.S. STATE OF NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING LIC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED - THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a. b.	Other: If SELECTED - U.S. STATE OF NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C A FOREIGN CONVERTING ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED - THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC BUSINESS ID:	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a.	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ELLC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED - THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE:	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a. b.	Other: If SELECTED - U.S. STATE OF NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domes: (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED Foodscience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE:	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a. b.	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with the (2) A copy of the document demonstrating approval of the conversion in domestic (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: IF SELECTED - U.S. STATE or NON-U.S. COUNTRY	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a. b.	Other: If SELECTED - U.S. STATE OF NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domes: (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED Foodscience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE:	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a. b. c.	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with the (2) A copy of the document demonstrating approval of the conversion in domestic (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED-SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (LLC/PLC/L3C)	CONVERTED LLC FIS NOT AN LLC. se law of its domestic state.
a. b. c.	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED - THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED- SELECT ONE OF THE FOLLOWING	TONVERTED LLC IS NOT AN LLC. Se law of its domestic state. tic state is attached.
a. b. c.	Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED - THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: If SELECTED - U.S. STATE or NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED- SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (ILC/PLC/L3C) PROFIT CORPORATION MBE D LLP D 1P	CONVERTED LLC FIS NOT AN LLC. Le law of its domestic state. tic state is attached. I NONPROFIT GENERAL PARTNERSHIP
a. b. c. d	Other: IF SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN LLC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING LLC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED — THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED FOODSCIENCE, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: IF SELECTED - U.S. STATE OF NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED - SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (LLC/PLC/L3C) PROFIT CORPORATION MBE OLIP A fully executed registration document, complete with statutory fee, for the converte	CONVERTED LLC FIS NOT AN LLC. Le law of its domestic state. tic state is attached. I NONPROFIT GENERAL PARTNERSHIP
e. CEE I/w acc adc Pa	Other: IF SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ELIC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with the (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED—FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: IF SELECTED - U.S. STATE OR NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED-SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (I.I.C/PLC/L3C) PROFIT CORPORATION MBE LIP LIP A fully executed registration document, complete with statutory fee, for the converte series of the converted converted and is provided in triplicate with the required documents attached, with any required dressed stamped envelope, and a check or money order for \$20.00 (11 V.S.A. § 4012(18)) and H. Peterson, Vice President	INONPROFIT General Partnership ed entity listed above (Line 3a.) is attached. at all above statements and information is is iste statutory fees for attached documents, a smade payable to "VT SOS." 3/2/2021
d e. CE	Other: IF SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED — THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED Foodscience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: IF SELECTED - U.S. STATE OF NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED - SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (LLC/PLC/L3C) PROFIT CORPORATION MBE LLP A fully executed registration document, complete with statutory fee, for the converted of the replace of the provided in triplicate with the required documents attached, with any required dressed stamped envelope, and a check or money order for \$20.00 (11 V.S. A. § 4012(18)) Further NEED NAME OF AUTHORIZER NIED NAME OF AUTHORIZER	INONPROFIT General Partnership ed entity listed above (Line 3a.) is attached. at all above statements and information is issite statutory fees for attached documents, a s made payable to "VT SOS."
d e. CE	Other: IF SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ELIC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with the (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED—THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED—FOODScience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: IF SELECTED - U.S. STATE OR NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED-SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (I.I.C/PLC/L3C) PROFIT CORPORATION MBE LIP LIP A fully executed registration document, complete with statutory fee, for the converte series of the converted converted and is provided in triplicate with the required documents attached, with any required dressed stamped envelope, and a check or money order for \$20.00 (11 V.S.A. § 4012(18)) and H. Peterson, Vice President	INONPROFIT General Partnership ed entity listed above (Line 3a.) is attached. at all above statements and information is is iste statutory fees for attached documents, a smade payable to "VT SOS." 3/2/2021
e. d e. I/w acc adc Pa PRII REO	Other: IF SELECTED - U.S. STATE or NON-U.S. COUNTRY - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC C - A FOREIGN CONVERTING ENTITY THAT IS NOT AN ILC MAY BECOME A FOREIGN OR DOMESTIC CONVERTED ENTITY THAT (1) This conversion was approved by the converting entity in accordance with th (2) A copy of the document demonstrating approval of the conversion in domest (3) Effective Date of Conversion in Domestic State: ONVERTED ENTITY: REQUIRED — THE ENTITY IN EXISTENCE FOLLOWING THIS CONVERSION NEW BUSINESS NAME: REQUIRED Foodscience, LLC BUSINESS ID: DOMESTIC STATE: REQUIRED - SELECT ONE: Vermont. Other: IF SELECTED - U.S. STATE OF NON-U.S. COUNTRY NEW BUSINESS TYPE: REQUIRED - SELECT ONE OF THE FOLLOWING LIMITED LIABILITY COMPANY (LLC/PLC/L3C) PROFIT CORPORATION MBE LLP A fully executed registration document, complete with statutory fee, for the converted of the replace of the provided in triplicate with the required documents attached, with any required dressed stamped envelope, and a check or money order for \$20.00 (11 V.S. A. § 4012(18)) Further NEED NAME OF AUTHORIZER NIED NAME OF AUTHORIZER	INONPROFIT General Partnership ed entity listed above (Line 3a.) is attached. at all above statements and information is is iste statutory fees for attached documents, a smade payable to "VT SOS." 3/2/2021

DIVISION OF CORPORATIONS Page 1 of 1

11 V.S.A. § 4146 (REV 07/01/16) VT039 - 7/1/2016 Wolters Kluwer Online

TRADEMARK
REEL: 007229 FRAME: 0140

FORM LLC-3(CONV) LLC CONVERSION

-4			
Marie College	Name and Games of Games		
	Vermont Secretary of State ARTICLES OF ORGANIZATION of a Domest	ia (Vanna	cant'l
20, 302			
	Limited Liability Company (LLC), Professional LLC (Pl Profit LLC (L3C)		

Business I	D:	

			- VISUS-CORPS. DIN - MAR 4 2021 ami 1:4
	PLEASE RETURN ACKNOWLEDGEMENT TO: (KEQUIRED - NAME A	ND ADDRESS)	
	KANA		
	AODROSE		
		}	essed by:
			FOR OFFICE USE ONLY
	:		
	PLEASE REVIEW INSTRUCTION	ONS PAGE BEFORE BEGINNING	: -
ARTIC	LE 1. BUSINESS NAME: REQUIRED – MUST INCLUDE AN LLC IDENT	TEIER LIKE "LIC" "PLC" or "L3C" PLEASE	E SEE INSTRUCTIONS PAGE FOR
	TE LIST OF LLC IDENTIFIERS.	, , , , , , , , , , , , , , , , , , ,	SEE MOTING CHOINS FAGE FOR
BUS	SINESS NAME: Foodscience, LLC	······	
ARTICE	.E 2. BUSINESS INFORMATION		•
a,	LLC TYPE: REQUIRED - SELECT ONE (1) OF THE FOLLOWING.		•
	This company will be a limited liability company (LL:	C) in accordance with 11 V.S.A. Ch	apter 25.
	This company will be a professional limited liability REQUIRED - IF SELECTED: MUST ATTACH PROFESSIONAL LICENSE(company (PLC) in accordance with	
	- Specific professional service to be provided: REQUIR. This company will be a low-profit limited liability co		1 V.S.A. Subch. 11.
h	EISCAL VEAD END MONTH, OCTIONAL		
b.	FISCAL YEAR END MONTH: OPTIONAL - DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE. - ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS	FOLLOWING THE FISCAL YEAR END ON RE	CORD WITH SECRETARY OF STATE.
ь. с.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE.	STATEMENT OF PRIMARY SERVICE(S) TO BE PROV	IDED BY THIS COMPANY
	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S	STATEMENT OF PRIMARY SERVICE(S) TO BE PROV	IDED BY THIS COMPANY
с. е.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS; OPTIONAL	STATEMENT OF PRIMARY SERVICE(S) TO BE PROV	IDED BY THIS COMPANY
c,	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS; OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED.	STATEMENT OF PRIMARY SERVICE(S) TO BE PROV	IDED BY THIS COMPANY
c. e. ARTICL	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane	STATEMENT OF PHIMARY SERVICE(S) TO BE PROV and products for human and pet co	IDED BY THIS COMPANY
c. e. ARTICL	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERREO) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO PO BOX 929 Harvest Lane City/Town: Williston	stateMent of Primary Service(s) to be Provand products for human and pet co	IDED BY THIS COMPANY
c. e. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO PO BOX 929 Harvest Lane City/Town: Williston Country: USA	STATEMENT OF PHIMARY SERVICE(S) TO BE PROV and products for human and pet co	IDED BY THIS COMPANY
c. e. ARTICL	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane	STATEMENT OF PHIMARY SERVICE(S) TO BE PROV and products for human and pet co State/Province: Vermont ZIP/Postal Code: 05495	IDED BY THIS COMPANY
c. e. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS; OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS; NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS; 929 Harvest Lane City/Town: Williston	State/Province: Vermont State/Province: Vermont ZIP/Postal Code: Usermont	IDED BY THIS COMPANY
c. e. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS; OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS; NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS; 929 Harvest Lane City/Town: Williston	STATEMENT OF PHIMARY SERVICE(S) TO BE PROV and products for human and pet co State/Province: Vermont ZIP/Postal Code: 05495	IDED BY THIS COMPANY
c. e. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA	State/Province: Vermont State/Province: Vermont ZIP/Postal Code: Usermont	IDED BY THIS COMPANY
c. e. ARTICL a. b.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED.	State/Province: Vermont State/Province: Vermont ZIP/Postal Code: Usermont	IDED BY THIS COMPANY
c. e. ARTICL a. b. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc.	State/Province: Vermont ZIP/Postal Code: Vermont ZIP/Postal Code: 05495	IDED BY THIS COMPANY
c. e. ARTICL a. b.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERREO) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO PO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc. PHYSICAL ADDRESS: AGENT'S NORMAL LOCATION DURING REGULAR	State/Province: Vermont ZIP/Postal Code: Vermont ZIP/Postal Code: 05495	IDED BY THIS COMPANY
c. e. ARTICL a. b. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERREO) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO PO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc. PHYSICAL ADDRESS: AGENT'S NORMAL LOCATION DURING REGULAR Street Address: NO PO BOX 17 G W Tatro Drive	State/Province: Vermont ZIP/Postal Code: Usermont	IDED BY THIS COMPANY INSUMPTION
c. e. ARTICL a. b. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc. PHYSICAL ADDRESS: AGENT'S NORMAL LOCATION DURING REGULAR Street Address: NO FO BOX 17 G W Tatro Drive City/Town: Jeffersonville	State/Province: Vermont ZIP/Postal Code: Vermont ZIP/Postal Code: 05495	IDED BY THIS COMPANY
c. e. ARTICL a. b. ARTICL a.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc. PHYSICAL ADDRESS: AGENT'S NORMAL LOCATION DURING REGULAR Street Address: NO PO BOX 17 G W Tatro Drive City/Town: Jeffersonville MAILING ADDRESS: 17 G W Tatro Drive	State/Province: Vermont ZIP/Postal Code: 05495 State/Province: Vermont ZIP/Postal Code: 05495 State/Province: Vermont ZIP/Postal Code: 05495	IDED BY THIS COMPANY INSUMPTION
c. e. ARTICL a. b.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc. PHYSICAL ADDRESS: AGENT'S NORMAL LOCATION DURING REGULAR Street Address: NO FO BOX 17 G W Tatro Drive City/Town: Jeffersonville	State/Province: Vermont ZIP/Postal Code: Usermont	IDED BY THIS COMPANY INSUMPTION
c. e. ARTICL a. b.	- DECEMBER IS DEFAULT FISCAL YEAR END IF NO ENTRY MADE ANNUAL REPORTS ARE DUE EACH YEAR WITHIN THE FIRST 3 MONTHS BUSINESS DISCRIPTION: REQUIRED - NAICS CODE (PREFERRED) OR BRIEF S DESCRIPTION: Manufacturer of nutritional supplements, food BUSINESS E-MAIL ADDRESS: OPTIONAL E 3. INITIAL DESIGNATED OFFICE REQUIRED. PHYSICAL STREET ADDRESS: NO FO BOX 929 Harvest Lane City/Town: Williston Country: USA MAILING ADDRESS: 929 Harvest Lane City/Town: Williston Country: USA E 4. INITIAL REGISTERED AGENT REQUIRED. NAME: National Registered Agents, Inc. PHYSICAL ADDRESS: AGENT'S NORMAL LOCATION DURING REGULAR Street Address: NO PO BOX 17 G W Tatro Drive City/Town: Jeffersonville MAILING ADDRESS: 17 G W Tatro Drive	State/Province: Vermont ZIP/Postal Code: 05495 State/Province: Vermont ZIP/Postal Code: 05495 State/Province: Vermont ZIP/Postal Code: 05495	nsumption _ 9919

TRADEMARK **REEL: 007229 FRAME: 0141**



ARTICLE a.	INITIAL MEMBERSHIP: REQUIRED -			VISOS-CORPS, DIN MAR 4 2021 AVII: 4
ъ.	MANAGEMENT STYLE: OPTIONAL— This company will be Memi This company will be Mana	ber-Managed.		
c.	INITIAL PRINCIPALS (MEMBERS OR	MANAGERS) OPTIONAL - SELECT ONE	(1) OF THE FOLLOWING	
	1. PRINCIPAL 1:			
	Address:	·····		
	City/Town:	***************************************	State/Province:	
	Country:		ZIP/Postal Code:	
	2. PRINCIPAL 2:			
	This company has more thatEFFECTIVE DATE OF THESE A	n two (2) principals. IF SELECTED - ML	IST ATTACH A COMPLETE LIST OF	<u>ADDITIONAL</u> MEMBERS OR MANAGEF
	E POST-DATED UP TO 90 DAYS FROM DA 7. ORGANIZER REQUIRED	TE OF RECEIPT.		
	NAME: Paul H. Peterson			
b.	ADDRESS: 929 Harvest Lane			
		e (1) organizer. IF SELECTED - MUST AT		IONAL ORGANIZERS.
By sig accurr check	ATION OF DOCUMENT REQUIRED ning below, I hereby certify, und ate as of the date of filing; and the or money order for \$125.00 made. Peterson	er penalty of law (11 V.S.A. § 4029 his form is being provided in duplic	ate, with a self-addressed	he above information is stamped envelope, and a
Printed	/Typed Name of Organizer	Signature	Title	Date
		PLEASE REVIEW INSTRUCTIONS PAGE	BEFORE FILING	
~				
	(1 V.S.A. § 4023 REV. 07/01/2015)	DIVISION OF CORPORATION OF CORPORATI	· · · · · ·	FORM LLC-1(D) ISTRATION (DOMESTIC)

VT019 - 06/28/2017 Wohers Kluwer Online

TRADEMARK REEL: 007229 FRAME: 0142

RECORDED: 03/22/2021