

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM638005

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	RELEASE OF SECURITY INTEREST		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
LSQ Funding Group, L.C.		03/29/2021	Limited Liability Company: FLORIDA
RECEIVING PARTY DATA			
Name:	Armand Kramedjian		
Street Address:	3961 Pace Ferry Drive		
City:	Atlanta		
State/Country:	GEORGIA		
Postal Code:	30339		
Entity Type:	INDIVIDUAL: UNITED STATES		
PROPERTY NUMBERS Total: 14			
Property Type	Number	Word Mark	
Registration Number:	4172188	CHEATERS	
Registration Number:	3549024	MELTED ICE CREAM	
Registration Number:	3549023	MELTED ICE CREAM	
Registration Number:	3431929	SOUR WAVE	
Registration Number:	3431928	TOO TARTS	
Registration Number:	3329950	SMART CHOICE	
Registration Number:	3004862	SUCK UPS	
Registration Number:	3329857	SINFULLY DELICIOUS DESSERT SPRAY	
Registration Number:	2960238	SINFULLY DELICIOUS	
Registration Number:	2232349		
Registration Number:	2186996	SOUR POWDER	
Registration Number:	2140375	TOO TARTS	
Registration Number:	1933707	KICKERS	
Registration Number:	1692363	KICKERS	
CORRESPONDENCE DATA			
Fax Number:	7704347376		
<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>			

OP \$365.00 4172188

Phone: 7704346868
Email: trademarkdocketing@taylorenghish.com
Correspondent Name: William Scott Creasman
Address Line 1: 1600 Parkwood Circle
Address Line 2: Ste 200
Address Line 4: Atlanta, GEORGIA 30339

NAME OF SUBMITTER:	W. Scott Creasman
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SIGNATURE:	/W. Scott Creasman/
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DATE SIGNED:	04/08/2021
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Total Attachments: 1

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FILED & RECORDED
Monday, March 29, 2021 9:10:47 AM
File Number: 007-2021-017390
Regina B. McIntyre
Barrow County Clerk of Superior Court

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Tannish Knowles 678-336-7256

B. E-MAIL CONTACT AT FILER (optional)
tknowles@taylorench.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Tannish Knowles
Taylor English Duma LLP
1600 Parkwood Circle, Suite 200
Atlanta, Georgia 30339**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
007-2019-032478

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. **PARTY INFORMATION CHANGE:**
Check one of these two boxes: Debtor or Secured Party of record
AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME | INDIVIDUAL'S FIRST PERSONAL NAME | INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

7c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY

8. **COLLATERAL CHANGE:** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME
LSQ Funding Group, L.C.

OR

9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**
70728.0002 Candy Mountain Sweets & Treats, LLC., as Debtor