

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM643171

<b>SUBMISSION TYPE:</b>	CORRECTIVE ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	Corrective Assignment to correct the Assignee zip code previously recorded on Reel 007241 Frame 0323. Assignor(s) hereby confirms the Merger.		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
THE PROMOTION COMPANY, INC.		12/15/2016	Corporation: INDIANA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	BONNIER CORPORATION		
<b>Doing Business As:</b>	DBA THE PROMOTION COMPANY, INC.		
<b>Street Address:</b>	480 N ORLANDO AVE STE 236		
<b>City:</b>	WINTER PARK		
<b>State/Country:</b>	FLORIDA		
<b>Postal Code:</b>	32789		
<b>Entity Type:</b>	Corporation: DELAWARE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4775696	STREET MACHINE SUMMER NATIONALS	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	4079267720		
<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>			
<b>Phone:</b>	407-926-7714		
<b>Email:</b>	ecipparone@savvyiplaw.com		
<b>Correspondent Name:</b>	ERICA M. CIPPARONE		
<b>Address Line 1:</b>	WOLTER VAN DYKE DAVIS, PLLC		
<b>Address Line 2:</b>	1900 SUMMIT TOWER BLVD., SUITE 140		
<b>Address Line 4:</b>	ORLANDO, FLORIDA 32810		
<b>NAME OF SUBMITTER:</b>	SHARI LIPARI		
<b>SIGNATURE:</b>	/SHARI LIPARI/		
<b>DATE SIGNED:</b>	04/29/2021		
<b>Total Attachments: 5</b>			
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source=Assumed Business Name#page1.tif

CORRECTED

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM636183

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	MERGER		
<b>EFFECTIVE DATE:</b>	12/16/2016		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
THE PROMOTION COMPANY, INC.		12/15/2016	Corporation: INDIANA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	BONNIER CORPORATION		
<b>Doing Business As:</b>	THE PROMOTION COMPANY, INC.		
<b>Street Address:</b>	480 N ORLANDO AVE STE 236		
<b>City:</b>	WINTER PARK		
<b>State/Country:</b>	FLORIDA		
<b>Postal Code:</b>	<del>32810</del> 32789		
<b>Entity Type:</b>	Corporation: DELAWARE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4775696	STREET MACHINE SUMMER NATIONALS	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	4079267720		
<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>			
<b>Phone:</b>	407-926-7714		
<b>Email:</b>	ecipparone@savvyiplaw.com		
<b>Correspondent Name:</b>	ERICA M. CIPPARONE		
<b>Address Line 1:</b>	WOLTER VAN DYKE DAVIS, PLLC		
<b>Address Line 2:</b>	1900 SUMMIT TOWER BLVD., SUITE 140		
<b>Address Line 4:</b>	ORLANDO, FLORIDA 32810		
<b>ATTORNEY DOCKET NUMBER:</b>	TPC		
<b>NAME OF SUBMITTER:</b>	SHARI LIPARI		
<b>SIGNATURE:</b>	/SHARI LIPARI/		
<b>DATE SIGNED:</b>	04/01/2021		
<b>Total Attachments: 4</b>			
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State of Indiana  
Office of the Secretary of State

CERTIFICATE OF MERGER  
of  
**BONNIER CORPORATION**

I, CONNIE LAWSON, Secretary of State, hereby certify that an Articles of Merger of the above Foreign For-Profit Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

The following non-surviving entity(s):

**THE PROMOTION COMPANY INC**

a(n) Domestic For-Profit Corporation

merged with and into the surviving entity(s):

**BONNIER CORPORATION**

NOW, THEREFORE with this document I certify that said transaction will become effective Friday, December 16, 2016.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 16, 2016

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

201606071144856 / 7459016

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>



**ARTICLES OF MERGER OF CORPORATIONS**  
 State Form 39036 (R10 / 7-16)  
 Approved by State Board of Accounts, 2016

Indiana Code 23-1-40-1 et seq.  
 23-1-16-3

FILING FEE: \$90.00

**ARTICLES OF MERGER / SHARE EXCHANGE  
 OF**

The Promotion Company, Inc.  
*(hereinafter the "nonsurviving corporation(s)")*

**INTO**

Bonnier Corporation  
*(hereinafter the "surviving corporation")*

**ARTICLE I - SURVIVING CORPORATION**

**SECTION I:**  
 The name of the corporation surviving the merger is Bonnier Corporation  
 and such name  has  has not *(designate which)* been changed as a result of the merger.

**SECTION II:**

a. The surviving corporation is a domestic corporation existing pursuant to the provisions of the Indiana Business Corporation Law incorporated on  
1/17/2007  
*(month, day, year)*

b. The surviving corporation is a foreign corporation incorporated under the laws of the State of Delaware and is  
 qualified  not qualified *(designate which)* to do business in Indiana.  
 If the surviving corporation is qualified to do business in Indiana, state the date of qualification: 06/07/2016  
*(month, day, year)*  
*(If Application for Certificate of Authority is filed concurrently herewith, state "upon approval of Application for Certificate of Authority.")*

**ARTICLE II - NONSURVIVING CORPORATION(S)**

The name, state of incorporation, and date of incorporation or qualification *(if applicable)* respectively, of each Indiana domestic corporation and Indiana qualified foreign corporation, other than the survivor, which is party to the merger are as follows:

Name of corporation <u>The Promotion Company</u>	
State of domicile <u>Indiana</u>	Date of incorporation or qualification in Indiana, if applicable <i>(month, day, year)</i> <u>05/24/1978</u>
Name of corporation	
State of domicile	Date of incorporation or qualification in Indiana, if applicable <i>(month, day, year)</i>
Name of corporation	
State of domicile	Date of incorporation or qualification in Indiana, if applicable <i>(month, day, year)</i>

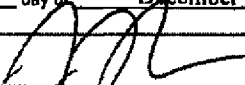
**ARTICLE III - PLAN OF MERGER OR SHARE EXCHANGE**

The Plan of Merger or Share Exchange, containing such information as required by Indiana Code 23-1-40-1(b), is set forth in "Exhibit A," attached hereto and made a part hereof.

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 CORPORATION DIV  
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ARTICLE IV – MANNER OF ADOPTION AND VOTE OF SURVIVING CORPORATION (Must complete Section 1 or 2.)				
<b>SECTION 1:</b> Shareholder vote not required.				
<input checked="" type="checkbox"/> The merger / share exchange was adopted by the incorporators or board of directors without shareholder action and shareholder action was not required.				
<b>SECTION 2:</b> Vote of shareholders (Select either A or B.)				
The designation (i.e., common, preferred or any classification where different classes of stock exist), number of outstanding shares, number of votes entitled to be cast by each voting group entitled to vote separately on the merger / share exchange and the number of votes each voting group represented at the meeting is set forth below:				
<input type="checkbox"/> A. Unanimous written consent executed on _____, 20____, and signed by all shareholders entitled to vote.				
<input type="checkbox"/> B. Vote of shareholders during a meeting called by the Board of Directors.				
	TOTAL	A	B	C
DESIGNATION OF EACH VOTING GROUP (i.e. preferred and common)				
NUMBER OF OUTSTANDING SHARES				
NUMBER OF VOTES ENTITLED TO BE CAST				
NUMBER OF VOTES REPRESENTED AT THE MEETING				
SHARES VOTED IN FAVOR				
SHARES VOTED AGAINST				

ARTICLE V – MANNER OF ADOPTION AND VOTE OF NONSURVIVING CORPORATION (Must complete Section 1 or 2.)				
<b>SECTION 1:</b> Shareholder vote not required.				
<input checked="" type="checkbox"/> The merger / share exchange was adopted by the incorporators or board of directors without shareholder action and shareholder action was not required.				
<b>SECTION 2:</b> Vote of members (Select either A or B.)				
The designation (i.e., common, preferred or any classification where different classes of stock exist), number of outstanding shares, number of votes entitled to be cast by each voting group entitled to vote separately on the merger / share exchange and the number of votes each voting group represented at the meeting is set forth below:				
<input type="checkbox"/> A. Unanimous written consent executed on _____, 20____, and signed by all shareholders entitled to vote.				
<input type="checkbox"/> B. Vote of shareholders during a meeting called by the Board of Directors.				
	TOTAL	A	B	C
DESIGNATION OF EACH VOTING GROUP (i.e. preferred and common)				
NUMBER OF OUTSTANDING SHARES				
NUMBER OF VOTES ENTITLED TO BE CAST				
NUMBER OF VOTES REPRESENTED AT THE MEETING				
SHARES VOTED IN FAVOR				
SHARES VOTED AGAINST				

SIGNATURE	
In witness whereof, the undersigned being the <u>Jeremy Thompson</u> of the surviving corporation executes these Articles of Merger / Share Exchange and verifies, subject to penalties of perjury, that the statements contained herein are true,	
this <u>15<sup>th</sup></u> day of <u>December</u> , 20 <u>16</u> .	
Signature 	Printed name Jeremy Thompson

State of Indiana  
Office of the Secretary of State

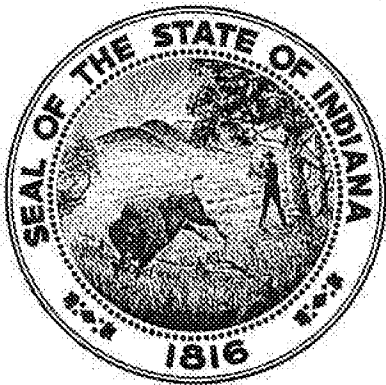
CERTIFICATE OF ASSUMED BUSINESS NAME  
of  
**BONNIER CORPORATION**

I, CONNIE LAWSON, Secretary of State, hereby certify that a Certificate of Assumed Business Name of the above Foreign For-Profit Corporation has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

Following said transaction, the above named entity will transact business under the assumed business name(s) of:

**THE PROMOTION COMPANY, INC.**

NOW, THEREFORE, with this document I certify that said transaction will become effective **Tuesday, December 27, 2016.**



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, **December 28, 2016.**

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

201606071144856 / 7465015

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>