

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM673467

<b>SUBMISSION TYPE:</b>	RESUBMISSION		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>RESUBMIT DOCUMENT ID:</b>	900632793		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
You Technology, LLC		03/28/2019	Limited Liability Company: OHIO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Inmar-YouTech, LLC		
<b>Street Address:</b>	635 Vine Street		
<b>City:</b>	Winston-Salem		
<b>State/Country:</b>	NORTH CAROLINA		
<b>Postal Code:</b>	27101		
<b>Entity Type:</b>	Limited Liability Company: OHIO		
<b>PROPERTY NUMBERS Total: 4</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5903740	YOUTECH	
<b>Registration Number:</b>	5903747	Y	
<b>Registration Number:</b>	5885585	COUPONCIERGE	
<b>Registration Number:</b>	3958027	YOU TECHNOLOGY U	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	3366077500		
<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>	3366077300		
<b>Email:</b>	tadmin@kilpatricktownsend.com		
<b>Correspondent Name:</b>	Laura Miller		
<b>Address Line 1:</b>	1100 Peachtree Street, Suite 2800		
<b>Address Line 2:</b>	Mailstop: IP Docketing - 22		
<b>Address Line 4:</b>	Atlanta, GEORGIA 30309		
<b>ATTORNEY DOCKET NUMBER:</b>	1140644		
<b>NAME OF SUBMITTER:</b>	Laura Miller, NC Bar Member		
<b>SIGNATURE:</b>	/laura miller/		
<b>DATE SIGNED:</b>	09/09/2021		

**Total Attachments: 4**

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DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
03/28/2019	201908701558	LIMITED LIABILITY COMPANY - AMENDMENT (LAM)	50.00	200.00	0.00	0.00

**Receipt**

This is not a bill. Please do not remit payment.

ALSTON & BIRD LLP  
1201 WEST PEACHTREE STREET  
ATLANTA, GA 30309-3424

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose  
2252859**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**INMAR - YOUTECH, LLC**

and, that said business records show the filing and recording of:

Document(s)

**LIMITED LIABILITY COMPANY - AMENDMENT**

Effective Date: 03/28/2019

Document No(s):

**201908701558**



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio this  
28th day of March, A.D. 2019.

**Ohio Secretary of State**

Form 543A Prescribed by:

**OFFICE OF THE**  
Ohio Secretary of State



Toll Free: (877) SOS-FILE (877-767-3453) | Central Ohio: (614) 466-3910

[www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov) | [BusServ@OhioSecretaryofState.gov](mailto:BusServ@OhioSecretaryofState.gov)

File online or for more information: [www.OHBusinessCentral.com](http://www.OHBusinessCentral.com)

## Domestic Limited Liability Company Certificate of Amendment or Restatement

**Filing Fee: \$50**

**Form Must Be Typed**

**(CHECK ONLY ONE (1) BOX)**

(1) Domestic Limited Liability Company

Amendment (129-LAM)

12/11/2013

Date of Formation  
(MM/DD/YYYY)

(2) Domestic Limited Liability Company

Restatement (142-LRA)

MM/DD/YYYY

Date of Formation  
(MM/DD/YYYY)

The undersigned authorized representative of:

YOU TECHNOLOGY, LLC

Name of Limited Liability Company

2252859

Registration Number

**If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.**

The name of said limited liability company shall be:

Inmar - YouTech, LLC

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd." or "ltd"

This limited liability company shall exist for a period of:

Period of Existence

Purpose

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

**Required**

Must be signed by a member, manager or other representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

/s/ Frederick R. Jorgenson

Signature

By (if applicable)

Frederick R. Jorgenson, EVP, General Counsel and Secretary

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name