

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM683345

SUBMISSION TYPE:	RESUBMISSION		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
RESUBMIT DOCUMENT ID:	900649949		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Colorado Spirits Importers LLC		08/03/2021	Limited Liability Company: COLORADO
RECEIVING PARTY DATA			
Name:	Colorado Spirits Importers LLC		
Street Address:	1930 14th Street		
City:	Boulder		
State/Country:	COLORADO		
Postal Code:	80302		
Entity Type:	Limited Liability Company: DELAWARE		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Serial Number:	90695790	SUERTE	
Serial Number:	90696511	400 A	
CORRESPONDENCE DATA			
Fax Number:	7349302494		
<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>			
Phone:	7347613780		
Email:	trademarks@bodmanlaw.com		
Correspondent Name:	Susan M. Kornfield		
Address Line 1:	201 S. Division Street, Suite 400		
Address Line 4:	Ann Arbor, MICHIGAN 48104-2201		
ATTORNEY DOCKET NUMBER:	035978-46		
NAME OF SUBMITTER:	Susan M. Kornfield		
SIGNATURE:	/susan m. kornfield/		
DATE SIGNED:	10/25/2021		
Total Attachments: 4			
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source=entity conversion#page4.tif

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF DOCUMENT FILED

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Statement of Conversion

with Document # 20171132452 of
Colorado Spirits Importers LLC

Delaware Foreign Limited Liability Company

(Entity ID # 20121149343)

consisting of 3 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/28/2021 that have been posted, and by documents delivered to this office electronically through 07/29/2021 @ 14:59:04.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 07/29/2021 @ 14:59:04 in accordance with applicable law. This certificate is assigned Confirmation Number 13334973 .



A handwritten signature in cursive script that reads "Jena Griswold".

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



Colorado Secretary of State
 Date and Time: 02/21/2017 01:18 PM
 ID Number: 20121149343
 Document number: 20171132452
 Amount Paid: \$50.00

Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Conversion Converting a Domestic Entity into a Foreign Entity
 filed pursuant to § 7-90-201.7 (1) and § 7-90-204.5 of the Colorado Revised Statutes (C.R.S.)

1. For the converting entity, its ID number, entity name, form of entity, jurisdiction under the law of which it is formed, and principal office address are

ID number 20121149343
 (Colorado Secretary of State ID number)

Entity name Colorado Spirits Importers LLC

Form of entity Limited Liability Company

Jurisdiction Colorado

Principal office street address 1930 14th Street
 (Street number and name)

Boulder CO 80302
 (City) (State) (ZIP/Postal Code)

United States
 (Country)

Principal office mailing address PO Box 19781
 (leave blank if same as street address) (Street number and name or Post Office Box information)

Boulder CO 80308
 (City) (State) (ZIP/Postal Code)

Colorado United States
 (Province – if applicable) (Country)

2. For the resulting entity, its true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

True name Colorado Spirits Importers LLC

Form of entity Foreign Limited Liability Company

Jurisdiction Delaware

Street address 1930 14th Street
 (Street number and name)

Boulder CO 80302
 (City) (State) (ZIP/Postal Code)

United States
 (Country)

Mailing address PO Box 19781
(leave blank if same as street address) (Street number and name or Post Office Box information)

Boulder CO 80308
(City) (State) (ZIP/Postal Code)

Colorado _____
(Province – if applicable) (Country)

3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.

4. (Mark the applicable box and complete the statement. Caution: Mark only one box.)

The resulting foreign entity does not maintain a registered agent in this state and service of process may be addressed to the entity and mailed to the principal address pursuant to section 7-90-704 (2), C.R.S.

or

The resulting foreign entity maintains a registered agent to accept service pursuant to section 7-90-204.5, C.R.S. The person appointed as registered agent has consented to being so appointed. Such registered agent's name and address are

Name Sokol Lawrence C.
(if an individual) (Last) (First) (Middle) (Suffix)

or

(if an entity) _____
(Caution: Do not provide both an individual and an entity name.)

Street address 3510 16th Street
(Street number and name)

Boulder CO 80304
(City) (State) (ZIP Code)

Mailing address _____
(leave blank, if same as street address) (Street number and name or Post Office Box information)

(City) (State) (ZIP Code)

5. (If applicable, adopt the following statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

6. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are _____
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent

documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

7. The true name and mailing address of the individual causing this document to be delivered for filing are

<u>Mack</u>	<u>RoxAnn</u>	<u>D.</u>	
(Last)	(First)	(Middle)	(Suffix)
<u>Faegre Baker Daniels LLP</u>			
(Street number and name or Post Office Box information)			
<u>1470 Walnut Street, Suite 300</u>			
<u>Boulder</u>	<u>CO</u>	<u>80302</u>	
(City)	(State)	(ZIP/Postal Code)	
<u></u>		<u></u>	
(Province – if applicable)		(Country)	

(If applicable, adopt the following statement by marking the box and include an attachment.)

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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