

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM696705

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|---|-------------------------------------|-------------------------|-----------------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT | | |
| NATURE OF CONVEYANCE: | ENTITY CONVERSION | | |
| CONVEYING PARTY DATA | | | |
| Name | Formerly | Execution Date | Entity Type |
| AVENTRI, INC. | | 12/14/2021 | Corporation: DELAWARE |
| RECEIVING PARTY DATA | | | |
| Name: | AVENTRI, LLC | | |
| Street Address: | 13 MARSHALL STREET | | |
| City: | NORWALK | | |
| State/Country: | CONNECTICUT | | |
| Postal Code: | 06854 | | |
| Entity Type: | Limited Liability Company: DELAWARE | | |
| PROPERTY NUMBERS Total: 5 | | | |
| Property Type | Number | Word Mark | |
| Registration Number: | 5723666 | AVENTRI | |
| Registration Number: | 5795705 | | |
| Registration Number: | 5381315 | ENGAGEMENT SCORE | |
| Registration Number: | 5426890 | ETOUCHES | |
| Registration Number: | 5381316 | EVENT PERFORMANCE INDEX | |
| CORRESPONDENCE DATA | | | |
| Fax Number: | 3128622200 | | |
| <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: | 3128622000 | | |
| Email: | luis.moreau@kirkland.com | | |
| Correspondent Name: | Kirkland & Ellis LLP - Luis Moreau | | |
| Address Line 1: | 300 N LaSalle Dr | | |
| Address Line 4: | Chicago, ILLINOIS 60654 | | |
| ATTORNEY DOCKET NUMBER: | 42952-14. | | |
| NAME OF SUBMITTER: | Luis Moreau | | |
| SIGNATURE: | /Luis Moreau/ | | |
| DATE SIGNED: | 12/21/2021 | | |
| Total Attachments: 4 | | | |

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE CORPORATION UNDER THE NAME OF "AVENTRI, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "AVENTRI, INC." TO "AVENTRI, LLC", FILED IN THIS OFFICE ON THE FOURTEENTH DAY OF DECEMBER, A.D. 2021, AT 8:09 O`CLOCK A.M.




Jeffrey W. Bullock, Secretary of State

4799738 8100V
SR# 20214079035

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204965761
Date: 12-14-21

TRADEMARK
REEL: 007538 FRAME: 0333

STATE OF DELAWARE
CERTIFICATE OF CONVERSION
FROM A CORPORATION TO A
LIMITED LIABILITY COMPANY PURSUANT TO
SECTION 18-214 OF THE LIMITED LIABILITY
COMPANY ACT

- 1.) The jurisdiction where the Corporation first formed is DELAWARE.
- 2.) The jurisdiction immediately prior to filing this Certificate is DELAWARE.
- 3.) The date the corporation first formed is MAY 26, 2010.
- 4.) The name of the Corporation immediately prior to filing this Certificate is
AVENTRI, INC..
- 5.) The name of the Limited Liability Company as set forth in the Certificate of
Formation is AVENTRI, LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the
10TH day of DECEMBER, A.D. 2021.

By: /s/Karin Wichman
Authorized Person

Name: KARIN WICHMAN
Print or Type


Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "AVENTRI, LLC"
FILED IN THIS OFFICE ON THE FOURTEENTH DAY OF DECEMBER, A.D.
2021, AT 8:09 O`CLOCK A.M.




Jeffrey W. Bullock, Secretary of State

4799738 8100V
SR# 20214079035

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Authentication: 204965761
Date: 12-14-21

TRADEMARK
REEL: 007538 FRAME: 0335

STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is AVENTRI, LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 251 LITTLE FALLS DRIVE (street), in the City of WILMINGTON, Zip Code 19808. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is CORPORATION SERVICE COMPANY

By: /s/Karin Wichman
Authorized Person

Name: KARIN WICHMAN
Print or Type