

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM708724

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Shelby Systems, Inc.		12/13/2021	Corporation: TENNESSEE
RECEIVING PARTY DATA			
Name:	Shelby Systems, LLC		
Street Address:	14488 Old Stage Road		
City:	Lenoir City		
State/Country:	TENNESSEE		
Postal Code:	37772		
Entity Type:	Limited Liability Company: TENNESSEE		
PROPERTY NUMBERS Total: 9			
Property Type	Number	Word Mark	
Registration Number:	3593225	ARENA	
Registration Number:	4301599	ARENA	
Registration Number:	3436124	CHURCH MINISTRY SYSTEM	
Registration Number:	3436122	INNOVATIVE SOLUTIONS INFINITE POSSIBILIT	
Registration Number:	4620895	SHELBY	
Registration Number:	3453859	SHELBY SYSTEMS	
Registration Number:	4620897	SHELBY SYSTEMS	
Registration Number:	3436123	THE POWER OF COMMUNITY	
Registration Number:	4873689	SHELBYNEXT	
CORRESPONDENCE DATA			
Fax Number:	8655234478		
<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:	8655464305		
Email:	mbradford@luedeka.com		
Correspondent Name:	Michael J. Bradford		
Address Line 1:	P. O. Box 1871		
Address Line 4:	Knoxville, TENNESSEE 37901		
ATTORNEY DOCKET NUMBER:	76282.00		

OP \$240.00 3593225

NAME OF SUBMITTER:	Michael J. Bradford
SIGNATURE:	/Michael J. Bradford/
DATE SIGNED:	02/16/2022
Total Attachments: 4 source=70671m1-topto-Shelby Systems LLC - Conversion#page1.tif source=70671m1-topto-Shelby Systems LLC - Conversion#page2.tif source=70671m1-topto-Shelby Systems LLC - Conversion#page3.tif source=70671m1-topto-Shelby Systems LLC - Conversion#page4.tif	



Tre Hargett
Secretary of State

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

Shelby Systems, LLC
14488 OLD STAGE RD
LENOIR CITY, TN 37772-5494

December 14, 2021

Control # 88949

Effective Date: 12/13/2021

Document Receipt

Receipt #: 6773110

Filing Fee: \$400.00

Payment-Check/MO - CFS-1, NASHVILLE, TN

\$400.00

ACKNOWLEDGMENT OF CONVERSION

SHELBY SYSTEMS, INC. converted from a **TENNESSEE For-profit Corporation** to
Shelby Systems, LLC
a **TENNESSEE Limited Liability Company**

This will acknowledge the filing of the attached Articles of Conversion with an effective date as indicated above.

When corresponding with this office or submitting documents for filing, please refer to the control number given above.

You must also file this document in the office of the Register of Deeds in the county where the entity has its principal office if such principal office is in Tennessee.

Tre Hargett
Secretary of State

Processed By: Alex Maxfield

ARTICLES OF ENTITY CONVERSION

(Domestic Business Corporation to a Domestic Unincorporated Entity) (ss-4612)



Business Services Division
Tre Hargett, Secretary of State
State of Tennessee
312 Rosa L. Parks Ave., 6th Fl.
Nashville, TN 37243
(615) 741-2286

Filing Fee: \$100.00

For Office Use Only

FILED

Rest Form

Pursuant to the provisions of T.C.A. §48-21-112(a) of the Tennessee Business Corporation Act, the undersigned hereby submits these articles of entity conversion:

1. Name of corporation immediately before the filing of the articles of entity conversion: Shelby Systems, Inc.

Secretary of State Control Number: 0088949

Name to which the corporation is to be changed: Shelby Systems, LLC

2. The type of unincorporated entity that the survivor will be (check one):

- General Partnership
- Limited Liability Company
- Limited Partnership
- Business Trust
- Joint Stock Association
- Unincorporated Nonprofit Association
- Other: _____

3. The plan of entity conversion was duly approved by the shareholders in the manner required by this chapter and the charter.

4. If the survivor is a filing entity, attached is the applicable public organic document, except that provisions that would not be required to be included in a restated public organic document may be omitted.

5. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time is:

(Not to exceed 90 days) Effective Date: _____ / _____ / _____ Time: _____
Month Day Year

12/1/2021

Mike Henricks

Signature Date

Signature

CFO

Michael Henricks

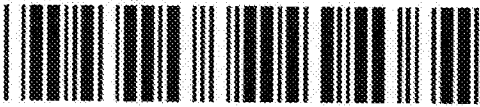
Signer's Capacity

Name (printed or typed)

***Note: Pursuant to T.C.A. §10-7-503 all information on this form is public record.**

Submitter Information: Name: Mike Henricks Phone #: () 6514853954

E1101-3933 12/13/2021 2:55 PM Received by Tennessee Secretary of State Tre Hargett



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY (ss-4270)



Business Services Division
Tre Hargett, Secretary of State
State of Tennessee
312 Rosa L. Parks AVE, 6th Fl.
Nashville, TN 37243-1102
(615) 741-2286

For Office Use Only

Filing Fee: \$50.00 per member
(minimum fee = \$300, maximum fee = \$3,000)

The Articles of Organization presented herein are adopted in accordance with the provisions of the Tennessee Revised Limited Liability Company Act.

1. The name of the Limited Liability Company is: Shelby Systems, LLC

(NOTE: Pursuant to the provisions of T.C.A. § 48-249-106, each Limited Liability Company name must contain the words "Limited Liability Company" or the abbreviation "LLC" or "L.L.C.")

2. Name Consent: (Written Consent for Use of Indistinguishable Name)

This entity name already exists in Tennessee and has received name consent from the existing entity.

3. This company has the additional designation of: _____

4. The name and complete address of the Limited Liability Company's initial registered agent and office located in the state of Tennessee is:

Name: C T Corporation System

Address: 300 Montvue Rd

City: Knoxville State: TN Zip Code: 37919-5546 County: Knox

5. Fiscal Year Close Month: _____

6. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time is: (Not to exceed 90 days)

Effective Date: _____ / _____ / _____ Time: _____
Month Day Year

7. The Limited Liability Company will be: Member Managed Manager Managed Director Managed

8. Number of Members at the date of filing: _____

9. Period of Duration: Perpetual Other _____ / _____ / _____
Month Day Year

10. The complete address of the Limited Liability Company's principal executive office is:

Address: 14488 Old Stage Rd.

City: Lenoir City State: Tennessee Zip Code: 37772 County: _____

Business Email: corinne.contento@communitybrands.com

E1101-3934 12/13/2021 2:55 PM Received by Tennessee Secretary of State Tre Hargett



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY (ss-4270)



Business Services Division
Tre Hargett, Secretary of State
State of Tennessee
312 Rosa L. Parks AVE, 6th Fl.
Nashville, TN 37243-1102
(615) 741-2285

For Office Use Only

Filing Fee: \$50.00 per member
(minimum fee = \$300, maximum fee = \$3,000)

The name of the Limited Liability Company is: Shelby Systems, LLC

11. The complete mailing address of the entity (if different from the principal office) is:

Address: _____
City: _____ State: _____ Zip Code: _____

12. Non-Profit LLC (required only if the Additional Designation of "Non-Profit LLC" is entered in section 3.)

I certify that this entity is a Non-Profit LLC whose sole member is a nonprofit corporation, foreign or domestic, incorporated under or subject to the provisions of the Tennessee Nonprofit Corporation Act and who is exempt from franchise and excise tax as not-for-profit as defined in T.C.A. § 67-4-2004. The business is disregarded as an entity for federal income tax purposes.

13. Professional LLC (required only if the Additional Designation of "Professional LLC" is entered in section 3.)

I certify that this PLLC has one or more qualified persons as members and no disqualified persons as members or holders.
Licensed Profession: _____

14. Series LLC (required only if the Additional Designation of "Series LLC" is entered in section 3.)

I certify that this entity meets the requirements of T.C.A. § 48-249-309(a) & (b)

15. Obligated Member Entity (list of obligated members and signatures must be attached)

This entity will be registered as an Obligated Member Entity (OME) Effective Date: _____ / _____ / _____
Month Day Year

I understand that by statute: THE EXECUTION AND FILING OF THIS DOCUMENT WILL CAUSE THE MEMBER(S) TO BE PERSONALLY LIABLE FOR THE DEBTS, OBLIGATIONS AND LIABILITIES OF THE LIMITED LIABILITY COMPANY TO THE SAME EXTENT AS A GENERAL PARTNER OF A GENERAL PARTNERSHIP. CONSULT AN ATTORNEY.

16. This entity is prohibited from doing business in Tennessee:

This entity, while being formed under Tennessee law, is prohibited from engaging in business in Tennessee.

17. Other Provisions: _____

12/13/2021

Signature Date

DocuSigned by

Mike Henricks

Signature

CFO

Signer's Capacity (if other than individual capacity)

Mike Henricks

Name (printed or typed)

21101-3935 12/13/2021 2:55 PM Received by Tennessee Secretary of State Tre Hargett