

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM710395

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	MERGER		
EFFECTIVE DATE:	12/31/2021		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Alta Communications, Inc.		10/22/2021	Corporation: PENNSYLVANIA
RECEIVING PARTY DATA			
Name:	Material US, Inc.		
Street Address:	1900 Avenue of the Stars		
Internal Address:	Suite 1600		
City:	Los Angeles		
State/Country:	CALIFORNIA		
Postal Code:	90067		
Entity Type:	Corporation: CALIFORNIA		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	6208394	KARMA AGENCY	
Registration Number:	6213950	KARMA AGENCY	
Registration Number:	4927292	KILLER	
CORRESPONDENCE DATA			
Fax Number:	3125693000		
<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:	3125691535		
Email:	linda.prainito@faegredrinker.com		
Correspondent Name:	Faegre Drinker Biddle & Reath LLP		
Address Line 1:	320 South Canal Street, Suite 3300		
Address Line 2:	Melissa S. Dillenbeck/Linda Prainito		
Address Line 4:	Chicago, ILLINOIS 60606		
ATTORNEY DOCKET NUMBER:	070371.260520		
NAME OF SUBMITTER:	Linda Prainito		
SIGNATURE:	/Linda Prainito/		
DATE SIGNED:	02/24/2022		

OP \$90.00 6208394

Total Attachments: 4

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source=Statement of Merger (Alta into Material US) 2021.12.31#page4.tif

Entity# : 6854354
Date Filed : 11/04/2021
Effective Date : 12/31/2021
Pennsylvania Department of State

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Return document by mail to: CT - COUNTER Name <u>139 05993 501</u> Address <u>nicole.grimme@writerskluwer.com</u> City _____ State _____ Zip Code _____ <input checked="" type="checkbox"/> Return document by email to: _____	Statement of Merger DSCB:15-335  TCO211104ZN0886
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Read all instructions prior to

Fee: \$70 plus \$40 for *each* association that is a party to the merger
The minimum amount to be submitted with this filing is \$150

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 335 (relating to Statement of merger), the undersigned, desiring to effect a merger, hereby states that:

A. For the surviving association:

1. The name of the surviving association is: MATERIAL US, INC.
2. The jurisdiction of formation of the surviving association: CA
3. The type of association of the surviving association is (check only one):
 - Business Corporation
 - Nonprofit Corporation
 - Limited Liability Company
 - Limited Partnership
 - Limited Liability (General) Partnership
 - Limited Liability Limited Partnership
 - Business Trust
 - Professional Association
 - Other _____

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PA DEPT OF STATE

TRADEMARK
REEL: 007642 FRAME: 0663

4. The surviving association is a (check only one box, provide address and follow instructions for attachments):

- Domestic (Pennsylvania) filing entity already in existence on Department of State records
If applicable, attach to this Statement any amendment to its public organic record approved as part of the plan of merger.
- NEW domestic (Pennsylvania) filing entity (includes limited liability limited partnership)
Attach to this Statement the public organic record of the new entity.
- Foreign filing association or foreign limited liability partnership already registered with the Department.
If applicable, attach to this Statement any amendment to or transfer of its foreign registration approved as part of the plan of merger.
- Foreign filing association or foreign limited liability partnership simultaneously seeking registration with the Department of State
Attach to this Statement a completed form DSCB: 15-412 (Foreign Registration Statement) with applicable fee and attachments.

Its current registered office address. Complete part (a) **OR** (b) – not both:

(a) 230 S Broad St., Suite 1500, Philadelphia, PA 19102 USA
Number and street City State Zip County

(b) c/o: _____
Name of Commercial Registered Office Provider County

- NEW domestic (Pennsylvania) limited liability partnership or electing partnership
Attach completed DSCB: 15-8201 (Statement of Registration) or DSCB: 15-8701A (Statement of Election)
- Domestic association that is not a domestic filing association
Attach to this Statement tax clearance certificates.

The address, including street and number, if any, of its principal office:

Number and street City State Zip County

- Foreign association that is not, and will not, be registered with the Department of State
Attach to this Statement tax clearance certificates.

The address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office:

Number and street City State Zip

B. For the merging association(s) that are not surviving the merger:

1. The name of the merging association is: ALTA COMMUNICATIONS, INC.

2. The jurisdiction of formation of the merging association: PA

3. The type of association is (check only one):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Business Trust |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership | <input type="checkbox"/> Other _____ |

4. Check and complete one of the following addresses.

<input checked="" type="checkbox"/>	<p>If the merging association is a domestic filing association, domestic limited liability partnership or registered foreign association, the current registered office address as on file with the Department of State. <i>Complete part (a) OR (b) – not both:</i></p> <p>(a) <u>230 S Broad St., Suite 1500, Philadelphia, PA 19102 USA</u></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 45%;">Number and street</td> <td style="width: 15%;">City</td> <td style="width: 10%;">State</td> <td style="width: 10%;">Zip</td> <td style="width: 10%;">County</td> </tr> </table> <p>(b) c/o: _____</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 85%;">Name of Commercial Registered Office Provider</td> <td style="width: 15%;">County</td> </tr> </table>	Number and street	City	State	Zip	County	Name of Commercial Registered Office Provider	County
Number and street	City	State	Zip	County				
Name of Commercial Registered Office Provider	County							
<input type="checkbox"/>	<p>If the merging association is a domestic association that is <i>not</i> a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:</p> <p>_____</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 45%;">Number and street</td> <td style="width: 15%;">City</td> <td style="width: 10%;">State</td> <td style="width: 10%;">Zip</td> <td style="width: 10%;">County</td> </tr> </table>	Number and street	City	State	Zip	County		
Number and street	City	State	Zip	County				
<input type="checkbox"/>	<p>If the merging association is a nonregistered foreign association, the address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office address:</p> <p>_____</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 45%;">Number and street</td> <td style="width: 15%;">City</td> <td style="width: 10%;">State</td> <td style="width: 10%;">Zip</td> <td style="width: 10%;"></td> </tr> </table>	Number and street	City	State	Zip			
Number and street	City	State	Zip					

**Use Statement of Merger – Addendum (DSCB:15-335AD)
 for additional merging parties that are not surviving the merger.**

C. Effective date of statement of merger (check, and if appropriate complete, one of the following):

- This Statement of Merger shall be effective upon filing in the Department of State.
- This Statement of Merger shall be effective on: 12/31/2021 at _____
Date (MM/DD/YYYY) Hour (if any)

D. Approval of merger by merging associations (check all applicable statement(s)):

- For domestic entities – The merger was approved in accordance with 15 Pa.C.S. Chapter 3, Subchapter C (relating to merger).
- For foreign associations – The merger was approved in accordance with the laws of the jurisdiction of formation.
- For domestic associations that are not domestic entities – The merger was approved by the interest holders of the merging association in the manner required by its organic law.

E. Attachments (see Instructions for required and optional attachments).

IN TESTIMONY WHEREOF, the undersigned merging associations have caused this Statement of Merger to be signed by duly authorized officers thereof this 22nd day of October, 20 21.

MATERIAL US, INC.
Name of Merging Association

Signature

ALTA COMMUNICATIONS, INC.
Name of Merging Association

Signature

CHIEF FINANCIAL OFFICER
Title

CHIEF FINANCIAL OFFICER
Title