

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM718663

SUBMISSION TYPE:	RESUBMISSION		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
RESUBMIT DOCUMENT ID:	900677252		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Worley Claims Services, LLC		03/23/2020	Limited Liability Company: DELAWARE
RECEIVING PARTY DATA			
Name:	Alacrity Solutions Group, LLC		
Street Address:	9725 Windermere Blvd		
City:	Fishers		
State/Country:	INDIANA		
Postal Code:	46037		
Entity Type:	Limited Liability Company: DELAWARE		
PROPERTY NUMBERS Total: 4			
Property Type	Number	Word Mark	
Registration Number:	3576946	WORLEY	
Registration Number:	6155360	A ALACRITY SOLUTIONS	
Registration Number:	5339648	470 FOURSEVENTY	
Registration Number:	5339653	FOURSEVENTY	
CORRESPONDENCE DATA			
Fax Number:	3125212875		
<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:	3125212775		
Email:	asacharoff@muchlaw.com		
Correspondent Name:	Adam K Sacharoff		
Address Line 1:	191 N Wacker Drive, Suite 1800		
Address Line 2:	Much Shelist, PC		
Address Line 4:	Chicago, ILLINOIS 60606		
ATTORNEY DOCKET NUMBER:	0013521.0001		
NAME OF SUBMITTER:	Adam K Sacharoff		
SIGNATURE:	/adamksacharoff/		
DATE SIGNED:	04/02/2022		

Total Attachments: 2

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Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "WORLEY CLAIMS SERVICES, LLC", CHANGING ITS NAME FROM "WORLEY CLAIMS SERVICES, LLC" TO "ALACRITY SOLUTIONS GROUP, LLC", FILED IN THIS OFFICE ON THE TWENTY-THIRD DAY OF MARCH, A.D. 2020, AT 9:43 O`CLOCK A.M.




Jeffrey W. Bullock, Secretary of State

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SR# 20202301652

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

Authentication: 202636019
Date: 03-23-20

TRADEMARK
REEL: 007669 FRAME: 0361

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: _____
Worley Claims Services, LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

Name of Limited Liability Company: Alacrity Solutions Group, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on
the 18th day of March, A.D. 2020.

By: Annie Hunt
Authorized Person(s)

Name: Annie Hunt
Print or Type