

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM719636

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Packaging Technology Group, Inc.		03/08/2022	Corporation:
RECEIVING PARTY DATA			
Name:	Packaging Technology Group, LLC		
Street Address:	565 Commerce Drive		
City:	Fall River		
State/Country:	MASSACHUSETTS		
Postal Code:	02720		
Entity Type:	Limited Liability Company: MASSACHUSETTS		
PROPERTY NUMBERS Total: 5			
Property Type	Number	Word Mark	
Registration Number:	5666539	HYDROSLEEVE	
Registration Number:	4686079	COOLGEL	
Registration Number:	5863994	TRUETEMP	
Registration Number:	5864116	TRUETEMP NATURALS	
Registration Number:	4052163	COOLBRICK	
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:	3128623210		
Email:	joe.phu@kirkland.com		
Correspondent Name:	Joe Phu		
Address Line 1:	300 North LaSalle		
Address Line 2:	KIRKLAND & ELLIS LLP		
Address Line 4:	Chicago, ILLINOIS 60654		
ATTORNEY DOCKET NUMBER:	49416-1		
NAME OF SUBMITTER:	Joe Phu		
SIGNATURE:	/Joe Phu/		
DATE SIGNED:	04/07/2022		

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Total Attachments: 4

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The Commonwealth of Massachusetts

William Francis Galvin
Secretary of the Commonwealth
One Ashburton Place, Boston, Massachusetts 02108-1512

**Articles of Entity Conversion of a
Domestic Business Corporation to a
Domestic Other Entity**

(General Laws Chapter 156D, Section 9.53; 950 CMR 113.29)

- (1) Exact name of corporation prior to conversion: Packaging Technology Group, Inc.
- (2) Registered office address: 565 Commerce Drive, Fall River, MA 02720
(number, street, city or town, state, zip code)
- (3) New name after conversion, which shall satisfy the organic law of the surviving entity:
Packaging Technology Group, LLC
- (4) New type of entity: Limited Liability Company
- (5) The plan of entity conversion was duly approved by the shareholders, and where required, by each separate voting group in the manner required by G.L. Chapter 156D and the articles of organization.
- (6) Attach any additional sheets containing all information required to be set forth in the public organic document of the surviving entity.
- (7) The conversion of the corporation shall be effective at the time and on the date approved by the Division, unless a later effective date is specified in accordance with the organic law of the surviving entity: _____

Signed by:  _____
(signature of authorized individual)

(Please check appropriate box)

- Chairman of the board of directors,
- President,
- Other officer,
- Court-appointed fiduciary.

on this 8th day of March, 2022

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The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

Limited Liability Company

Certificate of Organization

(General Laws Chapter 156C, Section 12)

Federal Identification No.: 20-3559643

(1) The exact name of the limited liability company:

Packaging Technology Group, LLC

(2) The street address of the office in the commonwealth at which its records will be maintained:

565 Commerce Drive
Fall River, MA 02720

(3) The general character of the business:

Thermal Packaging

(4) Latest date of dissolution, if specified: _____

(5) The name and street address, of the resident agent in the commonwealth:

NAME

ADDRESS

William C. Blezard

565 Commerce Drive, Fall River, MA 02720

(6) The name and business address, if different from office location, of each manager, if any:

NAME

ADDRESS

TRADEMARK

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- (7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:

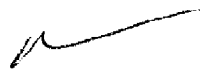
NAME	ADDRESS
William C. Blezard	565 Commerce Drive Fall River, MA 02720

- (8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property recorded with a registry of deeds or district office of the land court:

NAME	ADDRESS
William C. Blezard	565 Commerce Drive Fall River, MA 02720

- (9) Additional matters:

Signed by (by at least one authorized signatory): _____



Consent of resident agent:

I William C. Blezard

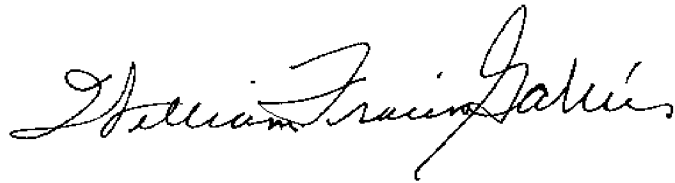
resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to G.L. c 156C § 12*

*or attach resident agent's consent hereto.

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

March 08, 2022 02:09 PM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is written in a cursive style with a large, prominent initial "W".

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth