

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM719905

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
TRP Acquisition Inc.		03/25/2022	Corporation: ILLINOIS
RECEIVING PARTY DATA			
Name:	TRP Acquisition LLC		
Street Address:	1000-46 Rohlwing Road		
City:	Lombard		
State/Country:	ILLINOIS		
Postal Code:	60148		
Entity Type:	Limited Liability Company: ILLINOIS		
PROPERTY NUMBERS Total: 8			
Property Type	Number	Word Mark	
Serial Number:	90639184	SEATABLES	
Registration Number:	2356284	THEROOMPLACE	
Registration Number:	1672199	YOU'LL LIKE OUR STYLE	
Registration Number:	3323686	ROOMPLACE KIDS	
Registration Number:	1570414	HARLEM FURNITURE	
Registration Number:	5646843	CB CUSTOM BED	
Registration Number:	4122693	APT2B	
Registration Number:	5579104	APT 2B	
CORRESPONDENCE DATA			
Fax Number:	3146673633		
<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:	3145526000		
Email:	idpocket@thompsoncoburn.com		
Correspondent Name:	Thompson Coburn LLP		
Address Line 1:	One US Bank Plaza		
Address Line 4:	St. Louis, MISSOURI 63101		
ATTORNEY DOCKET NUMBER:	54367-101230		
NAME OF SUBMITTER:	Matthew J. Hlmich		

CH \$215.00 90639184

SIGNATURE:	/matthew j. himich/
DATE SIGNED:	04/08/2022
Total Attachments: 4 source=IL Statement of Conversion - 3.25.2022#page1.tif source=IL Statement of Conversion - 3.25.2022#page2.tif source=IL Statement of Conversion - 3.25.2022#page3.tif source=IL Statement of Conversion - 3.25.2022#page4.tif	

EOA 205

Illinois Secretary of State
Department of Business Services
STATEMENT OF CONVERSION

Secretary of State
Department of Business Services
501 S. Second St., Rm. 350
Springfield, IL 62756
217-782-6961
www.cyberdriveillinois.com

Remit payment in the form of a cashier's check, a certified check, a money order, or an Illinois attorney's or a CPA's check payable to Secretary of State.

FILED

MAR 25 2022

JESSE WHITE
SECRETARY OF STATE

11503012

New Entity File Number

Filing Fee: \$100 Approved: me

Submit in duplicate Type or print clearly in black ink Do not write above this line

Converting Entity

Current file number: 68210712

- 1. Converting Entity Name: TRP ACQUISITION INC.
2. Current Entity Type: (select only one)
[X] For Profit Corporation [] Limited Liability Company [] General Partnership
[] Limited Liability Partnership [] Limited Partnership [] Not For Profit [] WCA
3. Jurisdiction and Date of Incorporation/Organization:
4. The conversion is authorized by the law of the foreign entity's jurisdiction of organization.

New Entity

- 5. Converted Entity Name: TRP ACQUISITION LLC
6. Converted Entity Type: (select only one)
[] For Profit Corporation [X] Limited Liability Company [] General Partnership
[] Limited Liability Partnership [] Limited Partnership [] Not For Profit [] WCA
7. Jurisdiction of Incorporation/Organization: ILLINOIS
8. The Converted Entity: (select only one)
[X] intends to transact business in Illinois [] will not be transacting business in Illinois (Please set forth address below.)
Address for Service of Process: 600 SOUTH SECOND ST., STE. 404
(P.O. Box alone is not acceptable) SPRINGFIELD, IL 62704
9. Effective Date of Conversion: If a future date is chosen, MUST be within 90 days of filing.
[X] Upon Filing [] Future Effective Date:

The Conversion was approved in accordance with Section 205 of the Entity Omnibus Act.
The formation document and fee for the Converted Entity must be attached.

10. The undersigned Entity has caused this statement to be signed by a duly authorized signer who affirms, under penalties of perjury, that the facts stated herein are true and correct. All signatures must be in BLACK INK.

Dated MARCH 25, 2022
Month & Day Year
Any Authorized Signer's Signature
BRUCE BERMAN, PRESIDENT
Name and Title (type or print)

TRP ACQUISITION INC.
Exact Name of Converting Entity



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE-Secretary of State

11503012
MARCH 25, 2022

COGENCY GLOBAL INC.
600 SOUTH SECOND ST, SUITE 404
SPRINGFIELD, IL 62704-2542

RE TRP ACQUISITION LLC

DEAR SIR OR MADAM:

IT HAS BEEN OUR PLEASURE TO APPROVE AND PLACE ON RECORD THE ARTICLES OF ORGANIZATION THAT CREATED YOUR LIMITED LIABILITY COMPANY. WE EXTEND OUR BEST WISHES FOR SUCCESS IN YOUR NEW VENTURE.

PLEASE NOTE! THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF THIS ANNIVERSARY MONTH NEXT YEAR. FAILURE TO TIMELY FILE MAY RESULT IN PENALTY AND DISSOLUTION. A PRE-PRINTED ANNUAL REPORT WILL BE MAILED TO THE REGISTERED AGENT AT THE REGISTERED OFFICE ADDRESS APPROXIMATELY 45 DAYS BEFORE THE DUE DATE.

STATEMENT OF CONVERSION HAS BEEN PLACED ON FILE AND THE LIMITED LIABILITY COMPANY HAS BEEN CREDITED WITH THE REQUIRED FEE.

PUBLICATIONS/FORMS AND OTHER SERVICES ARE AVAILABLE ON OUR WEBSITE. VISIT WWW.ILSOS.GOV TO VIEW THE STATUS OF THIS COMPANY, PURCHASE A CERTIFICATE OF GOOD STANDING, OR EVEN FILE THE ANNUAL REPORT REFERRED TO IN THE EARLIER PARAGRAPH.

SINCERELY YOURS,

JESSE WHITE
ILLINOIS SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY DIVISION
217-524-8008

TRADEMARK
REEL: 007685 FRAME: 0494

Form **LLC-5.5**
February 2020

Illinois
Limited Liability Company Act
Articles of Organization

FILE

This space for use by Secretary of State.

Secretary of State
Department of Business Services
Limited Liability Division
501 S. Second St., Rm. 351
Springfield, IL 62756
217-524-8008
www.cyberdriveillinois.com

SUBMIT IN DUPLICATE
Type or print clearly.

FILED

MAR 25 2022

JESSE WHITE
SECRETARY OF STATE

Payment must be made by certified check, cashier's check, Illinois attorney's check, C.P.A.'s check or money order payable to Secretary of State.

Filing Fee: \$150

Approved:



1. Limited Liability Company name (see Note 1): TRP ACQUISITION LLC

2. Address of principal place of business where records of the company will be kept: (P.O. Box alone or c/o is unacceptable.)
1000-46 ROHLWING RD., LOMBARD, IL 60148

3. Articles of Organization effective on: (check one)

the filing date

a later date (not to exceed 60 days after the filing date): _____
Month, Day, Year

4. Registered agent's name and registered office address:

Registered agent:	<u>COGENCY GLOBAL INC.</u>		
(P.O. Box alone or c/o is unacceptable.)	First Name	Middle Initial	Last Name
Registered office:	<u>600</u>	<u>South Second Street</u>	<u>Suite 404</u>
	Number	Street	Suite #
	<u>Springfield</u>	<u>IL</u>	<u>62704</u>
	City		ZIP

Note: The registered agent must reside in Illinois. If the agent is a business entity, it must be authorized to act as agent in this state.

5. Purpose(s) for which the Limited Liability Company is organized: (see Note 2)

The transaction of any or all lawful business for which Limited Liability Companies may be organized under this Act and/or exclusively for the purpose(s) stated below:

6. The duration of the company is perpetual unless otherwise stated. If the operating agreement provides for a dissolution date, enter that date here: _____
Month/Day Year

LLC-5.5

7. Optional: Other provisions for the regulation of the internal affairs of the company: (If additional space is needed, use standard sized paper.)

8. The Limited Liability Company has or will have on the effective date of filing one or more members.

9. Name(s) and business address(es) of the manager(s) and any member with the authority of manager:

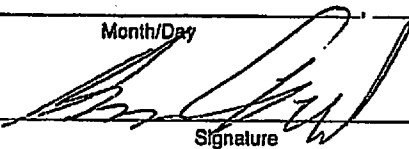
TRP HOLDINGS INC.	1000-46 ROHLWING RD.	LOMBARD	IL	60148
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP
Name	Number & Street	City	State	ZIP

(If additional space is needed, use standard sized paper.)

10. Name and Address of Organizer(s):

I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Organization are to the best of my knowledge and belief, true, correct and complete.

Dated: MARCH 25 2022
Month/Day Year

1. 
Signature
BARRY L. FISCHER
Name and Title (type or print)

If organizer is signing for a company or other entity, state name of company or entity.
2. _____
Signature

Name (type or print)

If organizer is signing for a company or other entity, state name of company or entity.

1. 55 E. MONROE ST., 37TH FL.
Number Street
CHICAGO
City
IL 60603
State ZIP
2. _____
Number Street

City

State ZIP

Note 1: The limited liability company name cannot contain any of the following terms or abbreviations including: Corporation, Incorporated, LTD., Co. or Limited Partnership. The name must contain the term Limited Liability Company, LLC or L.L.C. For the following two entity types: a company providing professional services licensed by the Illinois Department of Financial and Professional Regulation must instead contain the term or abbreviation Professional Limited Liability Company, PLLC or P.L.L.C. The name of a worker cooperative shall end with the term or abbreviation Limited Worker Cooperative Association, LWCA or L.W.C.A.

Note 2: A professional limited liability company must state the specific professional service or related professional services to be rendered by the professional limited liability company.

TRADEMARK