

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM721824

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>SEQUENCE:</b>	2		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Follett Higher Education Group, Inc.		02/10/2022	Corporation: ILLINOIS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Follett Higher Education Group, LLC		
<b>Street Address:</b>	3 Westbrook Corporate Center, Suite 200		
<b>City:</b>	Westchester		
<b>State/Country:</b>	ILLINOIS		
<b>Postal Code:</b>	60154		
<b>Entity Type:</b>	Limited Liability Company: ILLINOIS		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5022976	BRYTEWAVE	
<b>Registration Number:</b>	2777388	EPARTNER	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	6172359493		
<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>			
<b>Phone:</b>	6179517790		
<b>Email:</b>	ronald.duvernay@ropesgray.com		
<b>Correspondent Name:</b>	Ronald M. Duvernay		
<b>Address Line 1:</b>	Prudential Tower, 800 Boylston Street		
<b>Address Line 2:</b>	Ropes & Gray LLP		
<b>Address Line 4:</b>	Boston, MASSACHUSETTS 02199-3600		
<b>ATTORNEY DOCKET NUMBER:</b>	113273-0029		
<b>NAME OF SUBMITTER:</b>	Ronald M. Duvernay		
<b>SIGNATURE:</b>	/r duvernay/		
<b>DATE SIGNED:</b>	04/14/2022		
<b>Total Attachments: 4</b>			
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source=Conversion Doc#page3.tif  
source=Conversion Doc#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.ilsos.gov

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**

**FEB 10 2022**

JESSE WHITE  
SECRETARY OF STATE

110233603

**New Entity File Number**

Filing Fee: \$100 \_\_\_\_\_ Approved: 

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

**Converting Entity**

Current file number: 46456718

1. Converting Entity Name: Follett Higher Education Group, Inc.
2. Current Entity Type: (select only one)
 

<input checked="" type="checkbox"/> For Profit Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Not For Profit
		<input type="checkbox"/> LWCA
3. Jurisdiction and Date of Incorporation/Organization: State of Illinois, Thursday, 14 April 1966
4. **The conversion is authorized by the law of the foreign entity's jurisdiction of organization.**

**New Entity**

5. Converted Entity Name: Follett Higher Education Group, LLC
6. Converted Entity Type: (select only one)
 

<input type="checkbox"/> For Profit Corporation	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Not For Profit
		<input type="checkbox"/> LWCA
7. Jurisdiction of Incorporation/Organization: State of Illinois
8. The Converted Entity: (select only one)
 

intends to transact business in Illinois  will not be transacting business in Illinois (Please set forth address below.)

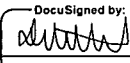
Address for Service of Process: C T CORPORATION SYSTEM  
(P.O. Box alone is not acceptable) 208 SO LASALLE ST, SUITE 814, CHICAGO, IL 60604
9. Effective Date of Conversion: \_\_\_\_\_ If a future date is chosen, MUST be within 90 days of filing.
 

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 February 1, 2022 Follett Higher Education Group, Inc.

DocuSigned by:  \_\_\_\_\_  
Month & Day Year  
Any Authorized Signer's Signature

David Wittels, Secretary  
Name and Title (type or print)



# OFFICE OF THE SECRETARY OF STATE

JESSE WHITE-Secretary of State

11023363  
FEBRUARY 10, 2022

C T CORPORATION SYSTEM  
208 SO LASALLE ST, SUITE 814  
CHICAGO, IL 60604-1101

RE FOLLETT HIGHER EDUCATION GROUP, 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](http://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: 007694 FRAME: 0391

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**

**FEB 10 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): Follett Higher Education Group, 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.)  
3 Westbrook Corporate Center, Suite 200, Westchester, IL 60154

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: C T CORPORATION SYSTEM  
(P.O. Box alone or c/o is unacceptable.)  
First Name Middle Initial Last Name  
Registered office: 208 SO LASALLE ST SUITE 814  
Number Street Suite #  
CHICAGO, IL 60604 IL  
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:

Table with 5 columns: Name, Number & Street, City, State, ZIP. Row 1: Follett Corporation, 3 Westbrook Corporate Center, Westchester, IL, 60154.

(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: February 1, 2022
Month/Day Year

1. [Signature]
Signature
David Wittels, President
Name and Title (type or print)

1. 3 Westbrook Corporate Center
Number Street
Westchester
City

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

IL 60154
State ZIP

2.
Signature
Name (type or print)

2.
Number Street
City

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

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.