

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM727847

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ENTITY CONVERSION		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Cardlock Fuels System, Inc.		11/04/2021	Corporation: CALIFORNIA
RECEIVING PARTY DATA			
Name:	Cardlock Fuels System, LLC		
Street Address:	1800 W. Katella Avenue, Suite 400		
City:	Orange		
State/Country:	CALIFORNIA		
Postal Code:	92867		
Entity Type:	Limited Liability Company: CALIFORNIA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	2334451	CF	
Registration Number:	2334452	CARDLOCK FUELS	
CORRESPONDENCE DATA			
Fax Number:			
<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:	2136207848		
Email:	iprecordations@whitecase.com		
Correspondent Name:	Justine Lu/White & Case LLP		
Address Line 1:	555 South Flower Street, Suite 2700		
Address Line 4:	Los Angeles, CALIFORNIA 90071		
ATTORNEY DOCKET NUMBER:	1194582-0002-S216		
NAME OF SUBMITTER:	Justine Lu		
SIGNATURE:	/Justine Lu/		
DATE SIGNED:	05/13/2022		
Total Attachments: 5			
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CH \$65.00 2334451

202131210003



State of California Secretary of State

1731943- out
Limited Liability Company
Articles of Organization - Conversion

LLC-1A

File #

FILED
Secretary of State
State of California

NOV 04 2021

100

impr

SKC

IMPORTANT — Read all instructions before completing this form.

This Space For Filing Use Only

Converted Entity Information

1. Name of Limited Liability Company (The name must include the words Limited Liability Company or the abbreviations LLC or L.L.C. The words Limited and Company may be abbreviated to Ltd. and Co., respectively.)

Cardlock Fuels System, LLC

2. The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

3. The limited liability company will be managed by (check on y one):

One Manager

More Than One Manager

All Limited Liability Company Member(s)

4. Initial Street Address of Limited Liability Company's Designated Office in CA

1800 W. Katella Avenue, Suite 400

City

Orange

State

CA

Zip Code

92867

5. Initial Mailing Address of Limited Liability Company, if different from Item 4

City

State

Zip Code

6. Initial Agent for Service of Process: Item 6a: List the name of an individual or a corporation registered in CA under California Corporations Code section 1506 that agrees to be your agent for service of process. You may not list the converted entity as the agent. Item 6b: If the agent is an individual, list the agent's CA business or residential street address. Item 6c: If the agent is an individual and the converting entity is a CA corporation, limited partnership or general partnership, list the the agent's mailing address. Do not list an address if the agent is a CA registered corporate agent as the address for service of process is already on file

a. Name of Agent For Service of Process

Robert W. Bollar

b. If an individual, Street Address of Agent for Service of Process - Do not list a P.O. Box

1800 W. Katella Avenue, Suite 400

City

Orange

State

CA

Zip Code

92867

c. If an individual, Mailing Address of Agent for Service of Process

1800 W. Katella Avenue, Suite 400

City

Orange

State

CA

Zip Code

92867

Converting Entity Information

7. Name of Converting Entity

Cardlock Fuels System, Inc.

8. Form of Entity

corporation

9. Jurisdiction

California

10. CA Secretary of State Entity Number, if any

C1731943

11. The principal terms of the plan of conversion were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required. If a vote was required, the following was required for each class.

The class and number of outstanding interests entitled to vote,
common stock 130,717 outstanding shares

AND

The percentage vote required of each class,
65.67%

Additional Information

12. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.

13. I certify under penalty of perjury that the contents of this document are true. I declare I am the person who executed this instrument, which execution is my act and deed.

Signature of Authorized Person

Signature of Authorized Person

Steven P. Greinke, President

Type or Print Name and Title of Authorized Person

Robert W. Bollar, Secretary

Type or Print Name and Title of Authorized Person



Secretary of State
Statement of Information
 (Limited Liability Company)

LLC-12

21-G62114

FILED

In the office of the Secretary of State
 of the State of California

DEC 21, 2021

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IMPORTANT — Read instructions **before completing this form.**

Filing Fee – \$20.00

Copy Fees – First page \$1.00; each attachment page \$0.50;
 Certification Fee - \$5.00 plus copy fees

1. Limited Liability Company Name (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

CARDLOCK FUELS SYSTEM, LLC

2. 12-Digit Secretary of State File Number **3. State, Foreign Country or Place of Organization** (only if formed outside of California)

202131210003

CALIFORNIA

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box 1800 W. Katella Avenue, Ste. 400	City (no abbreviations) Orange	State CA	Zip Code 92867
b. Mailing Address of LLC, if different than item 4a 1800 W. Katella Avenue, Ste. 400	City (no abbreviations) Orange	State CA	Zip Code 92867
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box 1800 W. Katella Avenue, Ste. 400	City (no abbreviations) Orange	State CA	Zip Code 92867

5. Manager(s) or Member(s)

If no **managers** have been appointed or elected, provide the name and address of each **member**. At least one name **and** address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete Item 5b ROBERT	Middle Name W.	Last Name BOLLAR	Suffix
b. Entity Name - Do not complete Item 5a Goldstream, Inc.			
c. Address 1800 W. Katella Avenue, Ste. 400	City (no abbreviations) Orange	State CA	Zip Code 92867

6. Service of Process (Must provide either Individual **OR** Corporation.)

INDIVIDUAL – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) ROBERT	Middle Name W.	Last Name BOLLAR	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 1800 W. Katella Avenue	City (no abbreviations) Orange	State CA	Zip Code 92867

CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b

7. Type of Business

a. Describe the type of business or services of the Limited Liability Company
Investments

8. Chief Executive Officer, if elected or appointed

a. First Name	Middle Name	Last Name	Suffix
b. Address			
City (no abbreviations)		State	Zip Code

9. The information contained herein, including any attachments, is true and correct.

12/21/2021

ROBERT W. BOLLAR

Corp. Sec. and VP

Date

Type or Print Name of Person Completing the Form

Title

Signature

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

Name: []

Company:

Address:

City/State/Zip: []



Secretary of State
Statement of Information
(Limited Liability Company)

LLC-12

22-B56464

FILED

In the office of the Secretary of State
of the State of California

MAR 11, 2022

This Space For Office Use Only

IMPORTANT — This form can be filed online at
bizfile.sos.ca.gov.

Read instructions before completing this form.

Filing Fee - \$20.00

Copy Fees - First page \$1.00; each attachment page \$0.50;
Certification Fee - \$5.00 plus copy fees

1. Limited Liability Company Name (Enter the **exact** name of the LLC. If you registered in California using an alternate name, see instructions.)

CARDLOCK FUELS SYSTEM, LLC

2. 12-Digit Secretary of State Entity Number

202131210003

3. State, Foreign Country or Place of Organization (only if formed outside of California)

CALIFORNIA

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1800 W. Katella Avenue, Ste. 400	Orange	CA	92867
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
1800 W. Katella Avenue, Ste. 400	Orange	CA	92867
c. Street Address of California Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1800 W. Katella Avenue, Ste. 400	Orange	CA	92867

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an additional managers/members, enter the names(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	Suffix
b. Entity Name - Do not complete Item 5a Goldstream, Inc.			
c. Address	City (no abbreviations)	State	Zip Code
1800 W. Katella Avenue, Ste. 400	Orange	CA	92867

Certificate Verification No.: 009373634 Date: 05/05/2022

6. Service of Process (Must provide either Individual **OR** Corporation.)

INDIVIDUAL – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b C T CORPORATION SYSTEM (C0168406)
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7. Type of Business

Describe the type of business or services of the Limited Liability Company Investments

8. Chief Executive Officer, if elected or appointed

a. First Name	Middle Name	Last Name	Suffix
b. Address	City (no abbreviations)	State	Zip Code

9. Labor Judgment

Does a Manager or Member have an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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10. By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

03/11/2022 Lisa Dubois Manager
Date Type or Print Name Title Signature

Certificate Verification No.: 009373634 Date: 05/05/2022

SCHEDULE

Trademarks

Trademark	App. No.	App. Date	Reg. No.	Reg. Date
CF	75484354	13-MAY-1998	2334451	28-MAR-2000
CARDLOCK FUELS	75484356	13-MAY-1998	2334452	28-MAR-2000