OP \$40.00 4025642

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM728120

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Salter Labs		08/22/2019	Corporation: CALIFORNIA

RECEIVING PARTY DATA

Name:	Salter Labs, LLC
Street Address:	2710 Northridge Drive NW
City:	Grand Rapids
State/Country:	ILLINOIS
Postal Code:	49544
Entity Type:	Limited Liability Company: CALIFORNIA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	4025642	MINI WHISKERS

CORRESPONDENCE DATA

Fax Number: 6037824378

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.

Phone: 603-622-8456

Email: agrenier@finchmaloney.com

Correspondent Name: Finch & Maloney PLLC

Address Line 1: 50 Commercial Street, Suite 300

Address Line 4: Manchester, NEW HAMPSHIRE 03101

NAME OF SUBMITTER:	Neal E. Friedman
SIGNATURE:	/Neal E. Friedman/
DATE SIGNED:	05/16/2022

Total Attachments: 3

source=buff-entity_conversion#page1.tif source=buff-entity_conversion#page2.tif source=buff-entity_conversion#page3.tif

> TRADEMARK REEL: 007722 FRAME: 0224



State of California Secretary of State

0752044- Out

Limited Liability Company Articles of Organization - Conversion

LLC-1A

201923510038

FILED Secretary of State State of California

AUG 2 2 2019

IMPORTANT — Read all instructions before completing this form.				This Space For Filing Use Only				
C	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.)							
	SALTER LABS, LLC							
2.	The purpose of the limited liability compunder the California Revised Uniform Lim	any is to engage in any lawful act o ited Liability Company Act.	r activity f	for which a limited liabil	ity company	y may be organized		
3.	The limited liability company will be mana	ged by (check only one):						
	One Manager	One Manager More Than One Manager			✓ All Limited Liability Company Member(s)			
4.	Initial Street Address of Limited Liability C	ompany's Designated Office in CA		Cīty	State	Zip Code		
	2365 CAMIN VIDA ROBLE		CARLSBAD			CA 92011		
5.	Initial Mailing Address of Limited Liability (Company, if different from Item 4		City	State	Zip Code		
6.	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 1505 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							
	CT Corporation System							
	b. If an individual, Street Address of Ager	nt for Service of Process - Do not list	a P.O. Bo	x City	State CA	Zip Code		
	c. If an individual, Mailing Address of Age	ent for Service of Process		City	State	Zip Code		
Co	nverting Entity Information	•						
	Name of Converting Entity SALTER LABS	·						
8.	Form of Entity	9. Jurisdiction		10. CA Secretary of Si	ate File Nur	mber. if any		
	Corporation	California		C0752044				
11.	The principal terms of the plan of conver exceeded the vote required. If a vote was	sion were approved by a vote of the required, the following was required:	e number for each c	of interests or shares	of each cla	ass that equaled or		
	The class and number of outstanding interests entitled to vote. 10,088 shares of Common Stock AND The percentage vote required of each class, More than 50 percent			of each class,				
Ad	ditional Information							
12.	Additional information set forth on the attack	ched pages, if any, is incorporated he	rein by thi	s reference and made p	art of this co	ertificate.		
13.	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.							
	angela Perkins, CFO							
Signature of Mutherized Person Type or F			Type or Print Name and Title of Authorized Person					
	Edward G			regory Pritchard, CEO				
	Signature of Authorized Person Type or Print Name and Title of Authorized Person				on			
LLC-	LC-1A (REV 01/2016) APPROVED BY SECRETARY OF STATE							

APPROVED BY SECRETARY OF STATE



I hereby certify that the foregoing transcript of ______ page(e) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

AUG 2 3 2019

Date: _____

ALEX PADILLA, Secretary of State

TRADEMARK

REEL: 007722 FRAME: 0226

RECORDED: 05/16/2022