

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM756911

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
CARE PROVIDERS INSURANCE SERVICES, LLC		12/02/2019	Limited Liability Company: TEXAS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	NSM Insurance Services, LLC		
<b>Street Address:</b>	555 E. North Lane		
<b>Internal Address:</b>	Suite 6060		
<b>City:</b>	Conshohocken		
<b>State/Country:</b>	PENNSYLVANIA		
<b>Postal Code:</b>	19428		
<b>Entity Type:</b>	Limited Liability Company: TEXAS		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4124347	CONDON SKELLY WE INSURE YOUR FUN	
<b>Registration Number:</b>	2063475	AMBUPRO	
<b>Registration Number:</b>	3355409	HEACOCK CLASSIC	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
	<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>Email:</b>	joanna.crosby@hklaw.com, thomas.brooke@hklaw.com, ptdocketing@hklaw.com		
<b>Correspondent Name:</b>	Joanna Crosby		
<b>Address Line 1:</b>	800 17th Street, NW		
<b>Address Line 2:</b>	Suite 1100		
<b>Address Line 4:</b>	Washington, D.C. 20006		
<b>NAME OF SUBMITTER:</b>	Joanna Crosby		
<b>SIGNATURE:</b>	/joannacrosby/		
<b>DATE SIGNED:</b>	09/22/2022		
<b>Total Attachments: 3</b>			
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**Office of the Secretary of State**

**CERTIFICATE OF FILING  
OF**

**NSM Insurance Services, LLC  
800171850**

[formerly: Care Providers Insurance Services, LLC]

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 12/05/2019

Effective: 12/05/2019



A handwritten signature in black ink, appearing to read "Ruth R. Hughs".

Ruth R. Hughs  
Secretary of State

FILED  
In the Office of the  
Secretary of State of Texas

DEC 05 2019

Corporations Section

**CERTIFICATE OF AMENDMENT  
TO THE  
ARTICLES OF ORGANIZATION  
OF  
CARE PROVIDERS INSURANCE SERVICES, LLC**

Pursuant to the provisions of the Texas Business Organizations Code, Chapter 101, Texas Statutes, **CARE PROVIDERS INSURANCE SERVICES, LLC**, a Texas limited liability company (the "Company"), adopts the following Certificate of Amendment to the Articles of Organization of the Company:

**FIRST:** The Articles of Organization of **CARE PROVIDERS INSURANCE SERVICES, LLC** were filed on February 10, 2003 and issued file number 800171850.

**SECOND:** Article 1 of the Articles of Organization is hereby amended in its entirety to read as follows:

"Article 1 - Name

The name of the company is NSM Insurance Services, LLC"

**THIRD:** Except as expressly provided herein, all of the terms and provisions of the Articles of Organization shall remain in full force and effect and are hereby ratified and confirmed.

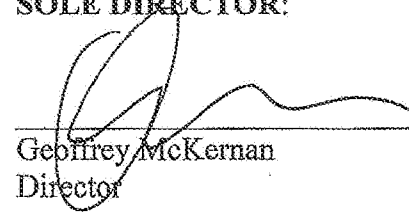
**FOURTH:** The foregoing amendment to the Articles of Organization was adopted on December 2, 2019.

**FIFTH:** The amendment to the Articles of Organization have been approved in the manner required by the Texas Business Organizations Code and the entity's governing documents.

*[signature page follows]*

IN WITNESS WHEREOF, the undersigned has executed this instrument on this 2<sup>nd</sup> day of December, 2019.

**SOLE DIRECTOR:**



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Geoffrey McKernan  
Director