

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM753634

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Flexential Colorado Corp.		11/19/2021	Corporation: COLORADO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Flexential Colorado LLC		
<b>Street Address:</b>	11900 E. Cornell Ave.		
<b>Internal Address:</b>	Bldg. B, 3rd Floor		
<b>City:</b>	Aurora		
<b>State/Country:</b>	COLORADO		
<b>Postal Code:</b>	80014		
<b>Entity Type:</b>	Limited Liability Company: COLORADO		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	3831627	VIAWEST	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	2026375910		
<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>	202 637 5600		
<b>Email:</b>	HLDCTMGroup@hoganlovells.com		
<b>Correspondent Name:</b>	Anna Kurian Shaw of Hogan Lovells US LLP		
<b>Address Line 1:</b>	555 13th Street NW		
<b>Address Line 4:</b>	Washington, D.C. 20004		
<b>ATTORNEY DOCKET NUMBER:</b>	083992.000010		
<b>NAME OF SUBMITTER:</b>	Brendan C. Quinn		
<b>SIGNATURE:</b>	/BrendanCQuinn/		
<b>DATE SIGNED:</b>	09/06/2022		
<b>Total Attachments: 6</b>			
source=Colorado Secretary of State - Statement of Conversion for Flexential Colorado Corp - CERTIFIED#page1.tif			
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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Combined Statement of Conversion

with Document # 20218088510 of  
Flexential Colorado LLC

Colorado Limited Liability Company

(Entity ID # 19991067430 )

consisting of 5 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/18/2021 that have been posted, and by documents delivered to this office electronically through 11/19/2021 @ 09:27:44.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 11/19/2021 @ 09:27:44 in accordance with applicable law. This certificate is assigned Confirmation Number 13595836.



A handwritten signature in cursive script that reads "Jena Griswold".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."*



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 of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

Colorado Secretary of State  
 Date and Time: 11/19/2021 09:23 AM  
 ID Number: 19991067430  
 Document number: 20218088510  
 Amount Paid: \$100.00

ABOVE SPACE FOR OFFICE USE ONLY

### Statement of Conversion

filed pursuant to § 7-90-201.7 (3) of the Colorado Revised Statutes (C.R.S.)

1. For the converting entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID number	<u>19991067430</u> <small>(Colorado Secretary of State ID number)</small>
Entity name or true name	<u>Flexential Colorado Corp.</u>
Form of entity	<u>Corporation</u>
Jurisdiction	<u>Colorado</u>
Street address	<u>11900 E Cornell Ave</u> <small>(Street number and name)</small> <u>Bldg B, 3rd Floor</u>
	<u>Aurora</u> <u>CO</u> <u>80014</u> <small>(City) (State) (ZIP/Postal Code)</small>
	<u>United States</u> <small>(Province – if applicable) (Country)</small>
Mailing address (leave blank if same as street address)	<u></u> <small>(Street number and name or Post Office Box information)</small>
	<u></u> <u></u> <u></u> <small>(City) (State) (ZIP/Postal Code)</small>
	<u></u> <u></u> <small>(Province – if applicable) (Country)</small>

2. The entity name of the resulting entity is Flexential Colorado LLC.  
*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.

4. *(If applicable, adopt the following statement by marking the box and include an attachment.)*

This document contains additional information as provided by law.

5. *(Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)*

*(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)*

The delayed effective date and, if applicable, time of this document are \_\_\_\_\_.  
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

6. The true name and mailing address of the individual causing this document to be delivered for filing are

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<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
1225 17th Street			
<small>(Street number and name or Post Office Box information)</small>			
<hr/>			
Denver	CO	80202	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
United States			
<small>(Province – if applicable)</small>		<small>(Country)</small>	

*(If applicable, adopt the following statement by marking the box and include an attachment.)*

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 of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

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**Articles of Organization**

filed pursuant to § 7-90-301 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

Flexential Colorado LLC

*(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)*

*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

2. The principal office address of the limited liability company's initial principal office is

Street address

11900 E Cornell Ave

*(Street number and name)*

Bldg B, 3rd Floor

Aurora

*(City)*

CO

*(State)*

80014

*(ZIP/Postal Code)*

United States

*(Country)*

*(Province – if applicable)*

Mailing address

(leave blank if same as street address)

*(Street number and name or Post Office Box information)*

*(City)*

*(State)*

*(ZIP/Postal Code)*

*(Province – if applicable)*

*(Country)*

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name

(if an individual)

*(Last)*

*(First)*

*(Middle)*

*(Suffix)*

or

(if an entity)

Corporation Service Company

*(Caution: Do not provide both an individual and an entity name.)*

Street address

1900 W. Littleton Boulevard

*(Street number and name)*

Littleton

*(City)*

CO

*(State)*

80120

*(ZIP Code)*

Mailing address

(leave blank if same as street address)

11900 E Cornell Ave

*(Street number and name or Post Office Box information)*

Bldg B, 3rd Floor

Aurora CO 80014  
(City) (State) (ZIP Code)

(The following statement is adopted by marking the box.)

The person appointed as registered agent has consented to being so appointed.

4. The true name and mailing address of the person forming the limited liability company are

Name  
(if an individual) Hadary Benjamin  
(Last) (First) (Middle) (Suffix)

or

(if an entity)  
(Caution: Do not provide both an individual and an entity name.)

Mailing address 11900 E Cornell Ave  
(Street number and name or Post Office Box information)  
Bldg B, 3rd Floor  
Aurora CO 80014  
(City) (State) (ZIP/Postal Code)  
Colorado United States  
(Province – if applicable) (Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in

(Mark the applicable box.)

one or more managers.

or

the members.

6. (The following statement is adopted by marking the box.)

There is at least one member of the limited liability company.

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

8. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are \_\_\_\_\_  
(mm/dd/yyyy hour:minute am/pm)

Notice:

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9. The true name and mailing address of the individual causing the document to be delivered for filing are

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1225 17th Street			
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<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
<hr/>			
	United States		
<small>(Province – if applicable)</small>	<small>(Country)</small>		

*(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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