

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM757465

<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>
Scott Wilson Design, Ltd.		02/04/2022	Corporation: ILLINOIS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	MNML LLC		
<b>Street Address:</b>	939 W. Lake Street		
<b>City:</b>	Chicago		
<b>State/Country:</b>	ILLINOIS		
<b>Postal Code:</b>	60607		
<b>Entity Type:</b>	Limited Liability Company: DELAWARE		
<b>PROPERTY NUMBERS Total: 9</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	6584582	BIO BOOST	
<b>Registration Number:</b>	5068960	LYNK	
<b>Registration Number:</b>	4486458	MNML	
<b>Registration Number:</b>	4257890	MNML	
<b>Registration Number:</b>	6163445	MNML	
<b>Registration Number:</b>	6014284	MNML	
<b>Registration Number:</b>	6053943	MNML	
<b>Registration Number:</b>	6036748	ONE CALM COOKIE	
<b>Serial Number:</b>	90858308	MNML	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	3127506546		
<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>	312.269.8000		
<b>Email:</b>	temanuelson@nge.com		
<b>Correspondent Name:</b>	Mike R. Turner		
<b>Address Line 1:</b>	2 North LaSalle Street, Suite 1700		
<b>Address Line 2:</b>	Neal, Gerber & Eisenberg LLP		
<b>Address Line 4:</b>	Chicago, ILLINOIS 60602		
<b>ATTORNEY DOCKET NUMBER:</b>	024466.0703		

CH \$240.00 6584582

<b>NAME OF SUBMITTER:</b>	Mike R. Turner
<b>SIGNATURE:</b>	/Mike R. Turner/
<b>DATE SIGNED:</b>	09/26/2022
<b>Total Attachments: 5</b> source=2022.02.04 - SWD conversion to MNML LLC#page1.tif source=2022.02.08 - New MNML formation - DE#page1.tif source=2022.02.08 - New MNML formation - DE#page2.tif source=2022.02.08 - New MNML formation - DE#page3.tif source=2022.02.08 - New MNML formation - DE#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 09 2022

JESSE WHITE
SECRETARY OF STATE

11023398

New Entity File Number

Filing Fee: \$100

Approved: [Signature]

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

Converting Entity

Current file number: 65619229

- 1. Converting Entity Name: Scott Wilson Design Ltd.
2. Current Entity Type: (select only one)
[ ] For Profit Corporation [ ] Limited Liability Company [ ] General Partnership
[ ] Limited Liability Partnership [ ] Limited Partnership [ ] Not For Profit [ ] LWCA
3. Jurisdiction and Date of Incorporation/Organization: ILLINOIS 6/28/07
4. The conversion is authorized by the law of the foreign entity's jurisdiction of organization.

New Entity

- 5. Converted Entity Name: MNML LLC
6. Converted Entity Type: (select only one)
[ ] For Profit Corporation [ ] Limited Liability Company [ ] General Partnership
[ ] Limited Liability Partnership [ ] Limited Partnership [ ] Not For Profit [ ] LWCA
7. Jurisdiction of Incorporation/Organization: DELAWARE
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:
(P.O. Box alone is not acceptable)
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 4, 2022
Month & Day Year

SCOTT WILSON DESIGN, LTD.
Exact Name of Converting Entity

[Signature]
Any Authorized Signer's Signature
Scott Wilson, President
Name and Title (type or print)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND  
CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "MNML LLC"  
FILED IN THIS OFFICE ON THE EIGHTH DAY OF FEBRUARY, A.D. 2022,  
AT 12:21 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

6603934 8100F  
SR# 20220415078

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202610305  
Date: 02-08-22

**TRADEMARK**  
**REEL: 007855 FRAME: 0341**


# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF AN ILLINOIS CORPORATION UNDER THE NAME OF "SCOTT WILSON DESIGN LTD." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "SCOTT WILSON DESIGN LTD." TO "MNML LLC", FILED IN THIS OFFICE ON THE EIGHTH DAY OF FEBRUARY, A.D. 2022, AT 12:21 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

6603934 8100F  
SR# 20220415078

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202610305  
Date: 02-08-22

**TRADEMARK**  
**REEL: 007855 FRAME: 0342**

STATE OF DELAWARE  
CERTIFICATE OF CONVERSION  
FROM A CORPORATION TO A  
LIMITED LIABILITY COMPANY PURSUANT TO  
SECTION 18-214 OF THE LIMITED LIABILITY  
COMPANY ACT

- 1.) The jurisdiction where the Corporation first formed is ILLINOIS.
- 2.) The jurisdiction immediately prior to filing this Certificate is ILLINOIS.
- 3.) The date the corporation first formed is 6/28/07.
- 4.) The name of the Corporation immediately prior to filing this Certificate is  
SCOTT WILSON DESIGN LTD.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of  
Formation is MNML LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the  
4TH day of FEBRUARY, A.D. 2022.

By: Scott Wilson  
Authorized Person

Name: SCOTT WILSON, MANAGER  
Print or Type

STATE OF DELAWARE  
CERTIFICATE OF FORMATION  
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is MNML LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 1209 ORANGE ST (street), in the City of WILMINGTON, Zip Code 19801. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is THE CORPORATION TRUST COMPANY.

*Scott Wilson*  
By: \_\_\_\_\_  
Authorized Person

Name: Scott Wilson, Manager  
Print or Type