

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM811749

<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>
Comprehensive Pharmacy Services, LLC		09/13/2021	Limited Liability Company: DELAWARE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	CPS SOLUTIONS, LLC		
<b>Street Address:</b>	655 Metro Place South, Suite 450		
<b>City:</b>	Dublin		
<b>State/Country:</b>	OHIO		
<b>Postal Code:</b>	43017		
<b>Entity Type:</b>	Limited Liability Company: DELAWARE		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5375149	CPS TELEPHARMACY	
<b>Registration Number:</b>	6652581		
<b>Registration Number:</b>	6823988	COMPREHENSIVE PURCHASING ALLIANCE	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	3123322196		
<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>	312-201-4000		
<b>Email:</b>	tmapps@goldbergkohn.com		
<b>Correspondent Name:</b>	Robert D. Leighton		
<b>Address Line 1:</b>	55 EAST MONROE, SUITE 3300		
<b>Address Line 4:</b>	Chicago, ILLINOIS 60603		
<b>ATTORNEY DOCKET NUMBER:</b>	8053.001		
<b>NAME OF SUBMITTER:</b>	Robert D. Leighton		
<b>SIGNATURE:</b>	/Robert D. Leighton/		
<b>DATE SIGNED:</b>	05/19/2023		
<b>Total Attachments: 2</b>			
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OP \$90.00 5375149

# 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 AMENDMENT OF "COMPREHENSIVE PHARMACY SERVICES, LLC", CHANGING ITS NAME FROM "COMPREHENSIVE PHARMACY SERVICES, LLC" TO "CPS SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE THIRTEENTH DAY OF SEPTEMBER, A.D. 2021, AT 8:40 O`CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE THIRTEENTH DAY OF SEPTEMBER, A.D. 2021 AT 11:59 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

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SR# 20213222175

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

Authentication: 204135525  
Date: 09-13-21

**TRADEMARK**  
**REEL: 008078 FRAME: 0850**

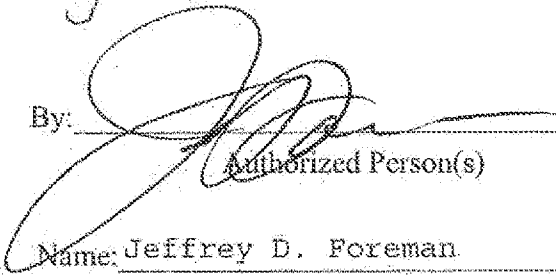
STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: Comprehensive Pharmacy Services, LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name has been amended to CPS Solutions, LLC  
To be effective at 11:59 PM on September 13, 2021.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 9th day of AUGUST, A.D. 2021.

By:   
Authorized Person(s)

Name: Jeffrey D. Foreman

Print or Type