

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM828909

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	02/28/2018

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Advanced Care Pharmacy Services, L.L.C.		02/28/2018	Limited Liability Company:

RECEIVING PARTY DATA

Name:	GENOA HEALTHCARE LLC
Street Address:	18300 CASCADE AVENUE S., SUITE 251
City:	TUKWILA
State/Country:	WASHINGTON
Postal Code:	98188
Entity Type:	Limited Liability Company: PENNSYLVANIA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	6253146	MED DROP

CORRESPONDENCE DATA**Fax Number:**

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: 4048851500
Email: tmatlanta@seyfarth.com
Correspondent Name: Joseph V. Myers III
Address Line 1: 1075 Peachtree St. NE, #2500
Address Line 4: Atlanta, GEORGIA 30309

ATTORNEY DOCKET NUMBER:	023845-009061
NAME OF SUBMITTER:	Stephen D. Lott
SIGNATURE:	/Stephen D. Lott/
DATE SIGNED:	08/02/2023

Total Attachments: 11

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MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU

Date Received FEB 27 2018	AC1 (FOR BUREAU USE ONLY)
This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.	

FILED
FEB 28 2018
ADMINISTRATOR
CORPORATIONS DIVISION

Name
Address
City State ZIP Code

EFFECTIVE DATE: 2/28/18
 Expiration date for new assumed names: December 31,
 Expiration date for transferred assumed names appear on page 2.

Document will be returned to the name and address you enter above. If left blank, document will be returned to the registered office.

CERTIFICATE OF MERGER
Cross Entity Merger for use by Corporations, Limited Liability Companies, and Limited Partnerships

Pursuant to the provisions of Act 284, Public Acts of 1972 (profit corporations), Act 162, Public Acts of 1982 (nonprofit corporations), Act 23, Public Acts of 1993 (limited liability companies) and Act 213, Public Acts of 1982 (limited partnerships), the undersigned entities execute the following Certificate of Merger:

1. The Plan of Merger (Consolidation) is as follows:

a. The name of each constituent entity and its identification number is:

Advanced Care Pharmacy Services - Saginaw, L.L.C.	801254582
Advanced Care Pharmacy - NEGC, LLC	801461686
SEE ATTACHMENT FOR REMAINING ENTITIES (14 TOTAL)	

b. The name of the constituent entity that will be the surviving (new) entity and its identification number is:

GENOA HEALTHCARE LLC (Pennsylvania Domestic Entity)	801869592
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Corporations and Limited Liability Companies provide the street address of the survivor's principal place of business:
 18300 Cascade Avenue S., Suite 251, Tukwila, WA 98188

2. (Complete only if a later effective date is desired other than the date of filing. The date must be no more than 90 days after the receipt of this document in this office.)

The merger (consolidation) shall be effective on the 28 day of February, 2018.

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CERTIFICATE OF MERGER

ATTACHMENT TO ITEM 1. A.

The name of each constituent entity and its identification number is:

Advanced Care Pharmacy Services—Genesee, LLC	801390292
ACPS—Detroit, LLC	801466261
ACPS—New Center, LLC	801397596
ACPS – Waterford, LLC	801422993
Tricare Pharmacy, Inc.	800662318
Group—Med, Inc.	800513824
HDI Pharmacy Services, Inc.	800015577
Advanced Care Pharmacy Services—Port Huron, LLC	801308605
Advanced Care Pharmacy – EM, LLC	801645720
Advanced Care Pharmacy Services, L.L.C.	801225718
Drace Holdings, LLC	801397595

The name of the constituent entity that will be the surviving (new) entity and its identification number is:

GENOA HEALTHCARE LLC (Pennsylvania Domestic Entity)	801869592
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Complete for Profit Corporations Only

For each constituent stock corporation, state:

Name of corporation	Designation and number of outstanding shares in each class or series	Indicate class or series of shares entitled to vote	Indicate class or series entitled to vote as a class, if any
See Attached			

If the number of shares is subject to change prior to the effective date of the merger, the manner in which the change may occur is as follows:

The manner and basis of converting shares are as follows:

See attached

The amendments to the Articles, or a restatement of the Articles, of the surviving corporation to be effected by the merger are as follows:

See attached

The Plan of Merger will be furnished by the surviving profit corporation, on request and without cost, to any shareholder of any constituent profit corporation.

The merger is permitted by the state or country under whose law it is incorporated and each foreign corporation has complied with that law in effecting the merger.

(Complete either Section (a) or (b) for each corporation)

a) The Plan of Merger was approved by unanimous consent of the Incorporators of _____, a Michigan corporation which has not commenced business, has not issued any shares, and has not elected a Board of Directors.

(Signature of Incorporator) (Type or Print Name) (Signature of Incorporator) (Type or Print Name)

(Signature of Incorporator) (Type or Print Name) (Signature of Incorporator) (Type or Print Name)

b) The plan of merger was approved by:
 the Board of Directors of _____, the surviving Michigan corporation, without approval of the shareholders in accordance with Section 703a of the Act.

the Board of Directors and the shareholders of the following Michigan corporation(s) in accordance with Section 703a of the Act.

Non-Surviving Corporations:

HDI Pharmacy Services, Inc. Tricare Pharmacy, Inc. Group-Med, Inc.

By SEE ATTACHED
(Signature of Authorized Officer or Agent)

By _____
(Signature of Authorized Officer or Agent)

(Type or Print Name)

(Type or Print Name)

(Name of Corporation)

TRADEMARK

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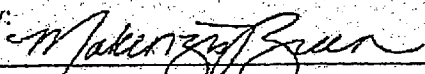
CERTIFICATE OF MERGER

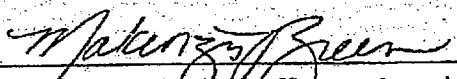
ATTACHMENT TO PAGE 3 – FOR PROFIT CORPORATIONS ONLY

Name of Corporation	Designation and number of outstanding shares in each class or series	Indicate class or series of shares entitled to vote	Indicate class or series entitled to vote in any class, if any
HDI Pharmacy Services, Inc.	3,000 Common	Common	None
Tricare Pharmacy, Inc.	1,000 Common	Common	None
Group-Med, Inc.	3,000 Common	Common	None

Manner and basis of converting shares are as follows:

The shares of HDI Pharmacy Services, Inc., Tricare Pharmacy, Inc., and Group-Med, Inc. ("the corporations") will be merged into Genoa Healthcare LLC, a Limited Liability Company, with Genoa Healthcare LLC surviving, no consideration.

By: 
 (Signature of Authorized Officer or Agent)

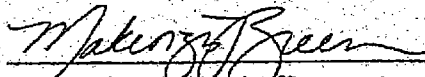
By: 
 (Signature of Authorized Officer or Agent)

MAKENZIE ZUERN, AUTHORIZED OFFICER
 (Type of Print Name)

MAKENZIE ZUERN, AUTHORIZED OFFICER
 (Type of Print Name)

HDI Pharmacy Services, Inc.
 (Name of Corporation)

Tricare Pharmacy, Inc.
 (Name of Corporation)

By: 
 (Signature of Authorized Officer or Agent)

MAKENZIE ZUERN, AUTHORIZED OFFICER
 (Type of Print Name)

Group-Med, Inc.
 (Name of Corporation)

Complete for Limited Liability Companies Only

Check one of the following if Limited Liability Company is the survivor.

- There are no changes to be made to the Articles of Organization of the surviving limited liability company.
- The amendments to the Articles, or a restatement of the Articles, of the surviving limited liability company to be effected by the merger are as follows:

The manner and basis of converting the membership interests are as follows:

The membership interests of the non-survivor Limited Liability Companies will be converted for no consideration and the member interests of the survivor, Genoa Healthcare LLC, shall remain unchanged.

The Plan of Merger was approved by the members of each constituent limited liability company in accordance with section 702(1).

The Plan of Merger was approved by the members of each domestic limited liability company in accordance with section 705a(5) and by each constituent business organization in the manner provided by the laws of the jurisdiction in which it is organized.

For each limited liability company involved in the merger, this document is signed in accordance with Section 103 of the Act.

Signed this _____ day of _____ SEE ATTACHED _____

By _____
(Signature of Member, Manager or Authorized Agent)

(Type or Print Name and Capacity)

(Name of Limited Liability Company)

Signed this _____ day of _____

By _____
(Signature of Member, Manager or Authorized Agent)

(Type or Print Name and Capacity)

(Name of Limited Liability Company)

CERTIFICATE OF MERGER

ATTACHMENT TO Complete for Limited Liability Companies Only

Survivor of merger:

Signed this 28TH day of, FEBRUARY 2018

By: Makenzie Zuern
(Signature of Member, Manager or Authorized Agent)

Genoa Healthcare LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT

Non-survivors of merger:

Signed this 28TH day of, FEBRUARY 2018

By: Makenzie Zuern
(Signature of Member, Manager or Authorized Agent)

Advanced Care Pharmacy Services – Saginaw, L.L.C.

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018

By: *Makenzie Zuern*
(Signature of Member, Manager or Authorized Agent)

Advanced Care Pharmacy NEGC, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018

By: *Makenzie Zuern*
(Signature of Member, Manager or Authorized Agent)

Advanced Care Pharmacy Services—Genesee, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

By: *Makenzie Zuern*
(Signature of Member, Manager or Authorized Agent)

ACPS—Detroit, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

By: *Makenzie Zuern*
(Signature of Member, Manager or Authorized Agent)

ACPS—New Center, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

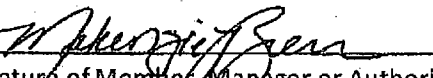
By: 
(Signature of Member, Manager or Authorized Agent)

ACPS – Waterford, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

By: 
(Signature of Member, Manager or Authorized Agent)

Advanced Care Pharmacy Services—Port Huron, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

By: *Makenzie Zuern*
(Signature of Member, Manager or Authorized Agent)

Advanced Care Pharmacy Services, L.L.C.

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

By: *Makenzie Zuern*
(Signature of Member, Manager or Authorized Agent)

Drace Holdings, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)

Signed this 28TH day of, FEBRUARY 2018,

By: 
(Signature of Member, Manager or Authorized Agent)

Advanced Care Pharmacy - EM, LLC

(Name of Limited Liability Company)

MAKENZIE ZUERN, AUTHORIZED AGENT
(Type or Print Name and Capacity)