

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM831021

SUBMISSION TYPE:	RESUBMISSION		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
RESUBMIT DOCUMENT ID:	900791673		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
SilverStone Group, LLC		07/15/2022	Limited Liability Company: NEBRASKA
RECEIVING PARTY DATA			
Name:	HUB International Great Plains, LLC		
Street Address:	11516 Miracle Hills Drive		
Internal Address:	Suite 100		
City:	Omaha		
State/Country:	NEBRASKA		
Postal Code:	68154		
Entity Type:	Limited Liability Company: NEBRASKA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	4166938	SILVERSTONE GROUP S	
Registration Number:	4163720	SILVERSTONE GROUP S	
CORRESPONDENCE DATA			
Fax Number:	2124552502		
<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>			
Phone:	2124552592		
Email:	jmull@stblaw.com		
Correspondent Name:	Courtney Welshimer		
Address Line 1:	425 Lexington Avenue		
Address Line 4:	New York, NEW YORK 10017		
ATTORNEY DOCKET NUMBER:	001871/0023		
NAME OF SUBMITTER:	J. Jason Mull		
SIGNATURE:	/J. Jason Mull/		
DATE SIGNED:	08/10/2023		
Total Attachments: 2			
source=HUB International Great Plains, LLC - NE - Amendment & Restated Cert of Organization - Name change			

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source=HUB International Great Plains, LLC - NE - Amendment & Restated Cert of Organization - Name change

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**AMENDED CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

Robert B. Evnen, Secretary of State
P.O. Box 94608
Lincoln, NE 68509
www.sos.nebraska.gov

Name of Limited Liability Company SilverStone Group, LLC

Date Certificate of Organization was filed 04/11/1996

Please mark the changes this amendment makes to the certificate as most recently amended or restated and provide the appropriate changes.

Name of Limited Liability Company _____

HUB International Great Plains, LLC

Professional Service being rendered by the Limited Liability Company

Street and mailing address of the Designated Office

Street Address _____ City _____ NE _____ Zip _____

Name of Registered Agent _____

Street, mailing address and post office box (if any) of Registered Agent

Street Address _____ City _____ NE _____ Zip _____

Any other changes to the certificate of organization

(attach additional pages if needed)

Effective date if other than the date filed _____

Date 07/15/2022

John M. Albright
Signature of Authorized Representative

John M. Albright
Printed Name of Authorized Representative

FILING FEE: \$30.00 (In-Office) / \$25.00 (Online)
Revised 07/01/2021

Neb. Rev. Stat. §21-118

APPLICATION FOR USE OF DECEPTIVELY SIMILAR NAME

Robert B. Eymen, Secretary of State
P.O. Box 94608
Lincoln, NE 68509
www.sos.nebraska.gov

The undersigned hereby submits the following information in support of this application:

- 1. That the Secretary of State rejected the applicant's request to use the following corporate name on the grounds that it did not meet the statutory standards.

Hub International Great Plains, LLC

- 2. Check either "a" or "b", whichever is applicable:

- a. Find attached certified copy of the final judgement of a court of competent jurisdiction establishing the applicant's right to use the name applied for in this State.
- b. Find below written consent by the other corporation or business entity to use the name applied for in this State.

CONSENT FOR USE OF DECEPTIVELY SIMILAR NAME

Consenting Entity: Hub International Mountain States Limited

Account Number of Entity Giving Consent: 10000327

Gives Consent To: Silverstone Group, LLC

To Use the Name: Hub International Great Plains, LLC

By signing this statement, the undersigned hereby certifies that he or she has the requisite authority to execute this consent.

 Signature of Consenting Entity's Representative	<u>Hub International Mountain States Limited</u> Printed Name of Consenting Entity's Representative	<u>John Albright</u> Printed Name of Consenting Entity's Representative
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Signature of Applicant

James M. Vogdes, Vice President
Printed Name and Title of Applicant

July 25, 2022
Date

Email Address (Optional)

FILED FEE: \$0.00
Revised 07/11/2021