# CH \$40.00.00 8751478

# TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 Assignment ID: TMI45912

| SUBMISSION TYPE:      | NEW ASSIGNMENT    |
|-----------------------|-------------------|
| NATURE OF CONVEYANCE: | ENTITY CONVERSION |

## **CONVEYING PARTY DATA**

| Name                         | Formerly | Execution Date | Entity Type           |  |
|------------------------------|----------|----------------|-----------------------|--|
| SSB Insurance Services, Inc. |          | 12/02/2021     | Corporation: DELAWARE |  |

# **RECEIVING PARTY DATA**

| Company Name:   | SSB Insurance Services, LLC           |
|-----------------|---------------------------------------|
| Street Address: | 7711 Center Avenue, Suite 200         |
| City:           | Huntington Beach                      |
| State/Country:  | CALIFORNIA                            |
| Postal Code:    | 92647                                 |
| Entity Type:    | Limited Liability Company: CALIFORNIA |

## **PROPERTY NUMBERS Total: 1**

| Property Type  | Number   | Word Mark            |
|----------------|----------|----------------------|
| Serial Number: | 87514780 | SEGUROS SIN BARRERAS |

#### **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:** 7146415100

**Email:** trademarks@rutan.com,lherman@rutan.com

Correspondent Name: Lindy M. Herman

Address Line 1: 18575 Jamboree Road, 9th Floor Address Line 4: Irvine, CALIFORNIA 92612

ATTORNEY DOCKET NUMBER: 102142.0018

NAME OF SUBMITTER: KATELYN NGHIEM

SIGNATURE: KATELYN NGHIEM

DATE SIGNED: 02/23/2024

## **Total Attachments: 6**

source=SSB Insurance - DE Certificate of Conversion#page1.tif source=SSB Insurance - DE Certificate of Conversion#page2.tif source=SSB Insurance - DE Certificate of Conversion#page3.tif source=SSB Insurance - CA Incorporation Formation#page1.tif source=SSB Insurance - CA Incorporation Formation#page2.tif

> TRADEMARK REEL: 008352 FRAME: 0950

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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 "SSB INSURANCE SERVICES, INC.", FILED IN THIS OFFICE ON THE FIRST DAY OF DECEMBER, A.D. 2021, AT 7:38 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE SECOND DAY OF DECEMBER, A.D. 2021 AT 8 O'CLOCK A.M.

You may verify this certificate online at corp.delaware.gov/authver.shtml

4908165 8100 SR# 20213949125 Authentication: 204859620 Date: 12-03-21

**TRADEMARK** REEL: 008352 FRAME: 0952

# STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A DELAWARE CORPORATION TO A NON-DELAWARE ENTITY

(Pursuant to Section 266 of the Delaware General Corporation Law)

This Certificate of Conversion (the "Certificate of Conversion") of SSB INSURANCE SERVICES, INC., a Delaware corporation (the "Converting Entity"), dated as of December 1, 2021, is being duly executed and filed by an authorized officer of the Converting Entity to convert the Converting Entity to a California limited liability company (the "Converted Entity") in accordance with Section 266 of the Delaware General Corporation Law (the "DGCL"):

- 1. The name of the Converting Entity is SSB INSURANCE SERVICES, INC.
- 2. The date of filing of the original certificate of incorporation with the Delaware Secretary of State of the Converting Entity is December 6, 2010.
- 3. The jurisdiction in which the Converted Entity is organized, formed or created is California and the name under which the Converted Entity shall be known is SSB INSURANCE SERVICES, LLC.
- 4. The future effective date of the conversion shall be December 2, 2021 at 8:00 a.m. eastern standard time.
- 5. This Certificate of Conversion has been approved in accordance with the provisions of 266 of the DGCL.
- 6. The Converting Entity may be served with process in the State of Delaware in any action, suit or proceeding for enforcement of any obligation of the Converting Entity arising while it was a corporation of the State of Delaware, and it irrevocably appoints the Secretary of State of the State of Delaware as its agent to accept service of process in any such action, suit or proceeding.
- 7. The address to which a copy of the process shall be mailed by the Secretary of State of the State of Delaware is: SSB INSURANCE SERVICES, INC., Attn: Legal Department, 7711 Center Avenue, Suite 200, Huntington Beach, CA 92647.

State of Delaware Secretary of State Division of Corporations Delivered 07:38 PM 12/01/2021 FILED 07:38 PM 12/01/2021

TRADEMARK

REEL: 008352 FRAME: 0953

IN WITNESS WHEREOF, this Certificate of Conversion has been executed by an authorized officer of the Converting Entity on the date and year first above written.

SSB INSURANCE SERVICES, INC.

Name: Carol R. Newman

Title: Executive Vice President and Secretary

REEL: 008352 FRAME: 0954





Business Entitles, 1500 11th St., 3rd Floor, Sacramento, CA 95814

# Thank You for Doing Business in California

Congratulations on the registration of your limited liability company with the California Secretary of State (SOS). Please see below for important information.

# What's next? Required Filings

<u>SOS Statement of Information</u> – Limited liability companies must fill out and file a complete Statement of Information (Form LLC-12) within the <u>first 90 days</u> of registering with the SOS, and every 2 years thereafter before the end of the calendar month of the original registration date.

How can you file your Statement of Information?

- Currently, Statements of Information can be submitted on paper to the SOS through the mail, or submitted in person (drop off) to the Sacramento office. Additional information regarding Statements of Information, including forms, instructions and fees is available at www.sos.ca.gov/business/be/statements.
- Current processing times for Statements of Information may be found at www.sos.ca.gov/business//be/processing-times.
- Limited liability companies may file their Statement of Information using our secure E-File Statement
  of Information filing service at https://llcbizfile.sos.ca.gov.

<u>Franchise Tax Board (FTB) Tax Filing</u> – Once your limited liability company is registered with the SOS, you are required to file a tax return with FTB for each taxable year even if you are not conducting business or have no income. Contact FTB at www.ftb.ca.gov or (800) 852-5711 for forms and requirements concerning franchise taxes or income taxes.

Be aware, if you fail to file a return by the original or extended due date, or fail to pay taxes when due, a penalty may be imposed by FTB. Please visit www.ftb.ca.gov/businesses/Penalty-Information.shtml for tax penalty related information.

#### Other Business Information and Resources

All business entities are subject to state and federal tax laws. You may wish to contact the following agencies to assist you with these issues:

- Internal Revenue Service www.irs.gov or call (800) 829-1040 for forms and issues concerning Federal tax, employer identification numbers, subchapter S elections.
- State Board of Equalization www.boe.ca.gov or call (800) 400-7115 for forms and issues concerning sales taxes or use taxes.
- Employment Development Department www.edd.ca.gov or call (800) 300-5616 for forms and issues concerning employment and payroll taxes.
- CalGold www.calgold.ca.gov for appropriate permit, licensing, and contact information for the various agencies that administer and issue these permits.
- SOS Business Resources www.sos.ca.gov/business/be/resources for a list of agencies you may need to contact to ensure proper compliance with California state law.
- CA Governor's Office of Business and Economic Development (Go-Biz) www.business.ca.gov for a range of business services including, site selection and permit assistance.
- The California Business Incentives Gateway (CBIG) https://cbig.ca.gov is a web portal that
  connects business owners and entrepreneurs with financial incentives.

LLC Welcome-Letter (Rev. 09/2018)

LLC-1/



# State of California Secretary of State

3338450- Out

# Limited Liability Company Articles of Organization - Conversion

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Secretary of State
State of California

100

DEC 0 2 2021 5x4

IMPORTANT - Read all instructions before completing this form.

This Space For Filing Use Only

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|--|---|------------------------------|---|---|--------------------|--|--|
| Converted Entity Information   |   |                              |   |   |                    |  |  |
| <ol> <li>Name of Limited Liability Company (The name must include the words Limited Liability Company or the abbreviations LLC or L.L.C. The words<br/>Limited and Company may be abbreviated to Ltd. and Co., respectively.)</li> </ol>   |   |                              |   |   |                    |  |  |
| SSB INSURANCE SERVICES, LLC  |   |                              |   |   | ľ                  |  |  |
| <ol><li>The purpose of the limited liability compa<br/>under the California Revised Uniform Limit</li></ol>  | ny is to engage in any lawful act or<br>led Liability Company Act.  | activity for v               | vhich a limited liabilit                        | y company                               | may be organized   |  |  |
| 3. The limited liability company will be manage  | ged by (check only one):  |                              |   |   |                    |  |  |
| One Manager ✓  | One Manager   |                              |   | All Limited Liability Company Member(s) |                    |  |  |
| 4. Initial Street Address of Limited Liability Co  | - Cit   | <i>y</i>                     | State   | Zip Code                                |                    |  |  |
| 1301 Dove Street, Suite 200  |   | Newpor                       | t Beach   |   | 2660               |  |  |
| 5. Initial Mailing Address of Limited Liability C  | *   | Cit                          | •   | State                                   | Zip Code           |  |  |
| SSB INSURANCE SERVICES, LLC,   | Attn: Legal Dept., 7711 Cent  | er Ave., S                   | uite 200, Hunti                                 | ngton Bea                               | ach CA 92647       |  |  |
| 6. Initial Agent for Service of Process: Item 6a: List the name of an individual or a corporation registered in CA under California Corporations Code section 1505 that agrees to be your agent for service of process. You may not list the converted entity as the agent. Item 6b: If the agent is an individual, list the agent's CA business or residential street address. Item 6c: If the agent is an individual and the converting entity is a CA corporation, limited partnership or general partnership, list the the agent's mailing address. Do not list an address if the agent is a CA registered corporate agent as the address for service of process is already on file. |   |                              |   |   |                    |  |  |
| a. Name of Agent For Service of Process  |   |                              | ,   |   |                    |  |  |
| Corporation Service Company v  | which will do business in Ca  | ilifornia a                  | s CSC-Lawyers                                   | Incorpor                                | ating Service      |  |  |
| b. If an individual, Street Address of Ager  | b. If an individual, Street Address of Agent for Service of Process - Do not list a P.O. Box City State Zip Code CA |                              |   |   |                    |  |  |
| c. If an individual, Mailing Address of Age  | ent for Service of Process  |                              | City  | State                                   | Zip Code           |  |  |
| Converting Entity Information  |   |                              |   | র পতা কিং শুরু অনুস্থান                 |                    |  |  |
| 7. / Name of Converting Entity   |   |                              |   | ~ <del></del>                           |                    |  |  |
| SSB INSURANCE SERVICES, INC.   |   |                              |   |   | ·                  |  |  |
| 8. Form of Entity  | 9. Jurisdiction   | 10                           | 10. CA Secretary of State Entity Number, if any |   |                    |  |  |
| corporation  | Delaware  | ŀ                            | C3338450  |   |                    |  |  |
| 11. The principal terms of the plan of conver exceeded the vote required. If a vote was  | sion were approved by a vote of the required, the following was required:   | e number of<br>or each class | interests or shares                             | of each class                           | ss that equaled or |  |  |
| The class and number of outstanding  | interests entitled to vote.   | ND                           | The percentage v                                | ote required                            | of each class.     |  |  |
| 1,000 shares of Common Stock Greater than 50%  |   |                              |   |   |                    |  |  |
| Additional Information   |   |                              |   |   |                    |  |  |
| 12. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.  |   |                              |   |   |                    |  |  |
| 13. I certify under penalty of perjury that the contents of this document are true. I declare I am the person who executed this instrument, which execution is my act and deed.  |   |                              |   |   |                    |  |  |
| Ca   |   |                              | Carol R. Newman, Secretary                      |   |                    |  |  |
| Signature of Authorized Person  Type or Print Name and Title of Authorized Person  |   |                              |   |   | n                  |  |  |
| Signature of Authorized Person Type or Print Name and Title of Authorized Person   |   |                              | n ,   |   |                    |  |  |
| LLC-1A (REV 12/2020) 2020 California Secretary of State  |   |                              |   |   |                    |  |  |

TRADEMARK REEL: 008352 FRAME: 0956



I hereby certify that the foregoing transcript of \_\_\_\_\_ page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

DEC 16 2021

SHIRLEY N. WEBER, Ph.D., Secretary of State

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**RECORDED: 02/23/2024**