

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Fringe Benefits Management Company		11/29/2010	CORPORATION: FLORIDA

RECEIVING PARTY DATA

Name:	FBMC Benefits Management, Inc.
Street Address:	3101 Sessions Road
City:	Tallahassee
State/Country:	FLORIDA
Postal Code:	32303
Entity Type:	CORPORATION: FLORIDA

PROPERTY NUMBERS Total: 24

Property Type	Number	Word Mark
Serial Number:	85165690	TAKE CONTROL BACK
Serial Number:	85115841	FBMC BENEFITS MANAGEMENT
Serial Number:	85165676	MAKE BETTER CHOICES
Serial Number:	85115858	OUR WORLD BENEFITS YOUR WORLD
Serial Number:	78156827	LIFE EVENT ADVANTAGE
Serial Number:	77847494	FBMC PREMIER BENEFITS SOLUTIONS
Serial Number:	77619374	FBMCMART
Serial Number:	77572076	HEALTHAFFORD
Serial Number:	77479097	MYFBMC CARD
Serial Number:	77479055	PREMIERCONTINUATION
Serial Number:	77479046	PREMIER125
Serial Number:	77479038	PREMIERCOMMUTE
Serial Number:	77479031	PREMIERHRA
Serial Number:	77479008	PREMIERHSA

CH \$615.00 85165690

TRADEMARK

900179818

REEL: 004441 FRAME: 0437

Serial Number:	77478997	PREMIERFSA
Serial Number:	76611496	EZ REIMBURSE HSA
Serial Number:	76611498	EZ REIMBURSE HRA
Serial Number:	76611497	EZ REIMBURSE FSA
Serial Number:	76611495	EZ REIMBURSE QTB
Serial Number:	76611237	FBMC PROVEN BENEFIT SOLUTIONS
Serial Number:	75173746	EASY BENEFITS CARD
Serial Number:	75308825	EZ REIMBURSE
Serial Number:	75173738	EZ BENEFITS
Serial Number:	75173743	BENEFITS EDUCATOR

CORRESPONDENCE DATA

Fax Number: (404)873-8737
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
Phone: 404-873-8736
Email: trademarks@agg.com
Correspondent Name: Auma N. Reggy, Esq.
Address Line 1: 171 17th Street, NW, Suite 2100
Address Line 2: Arnall Golden Gregory LLP
Address Line 4: Atlanta, GEORGIA 30363-1031

ATTORNEY DOCKET NUMBER:	26576.1
NAME OF SUBMITTER:	Auma N. Reggy
Signature:	/Auma N. Reggy/
Date:	12/27/2010

Total Attachments: 5
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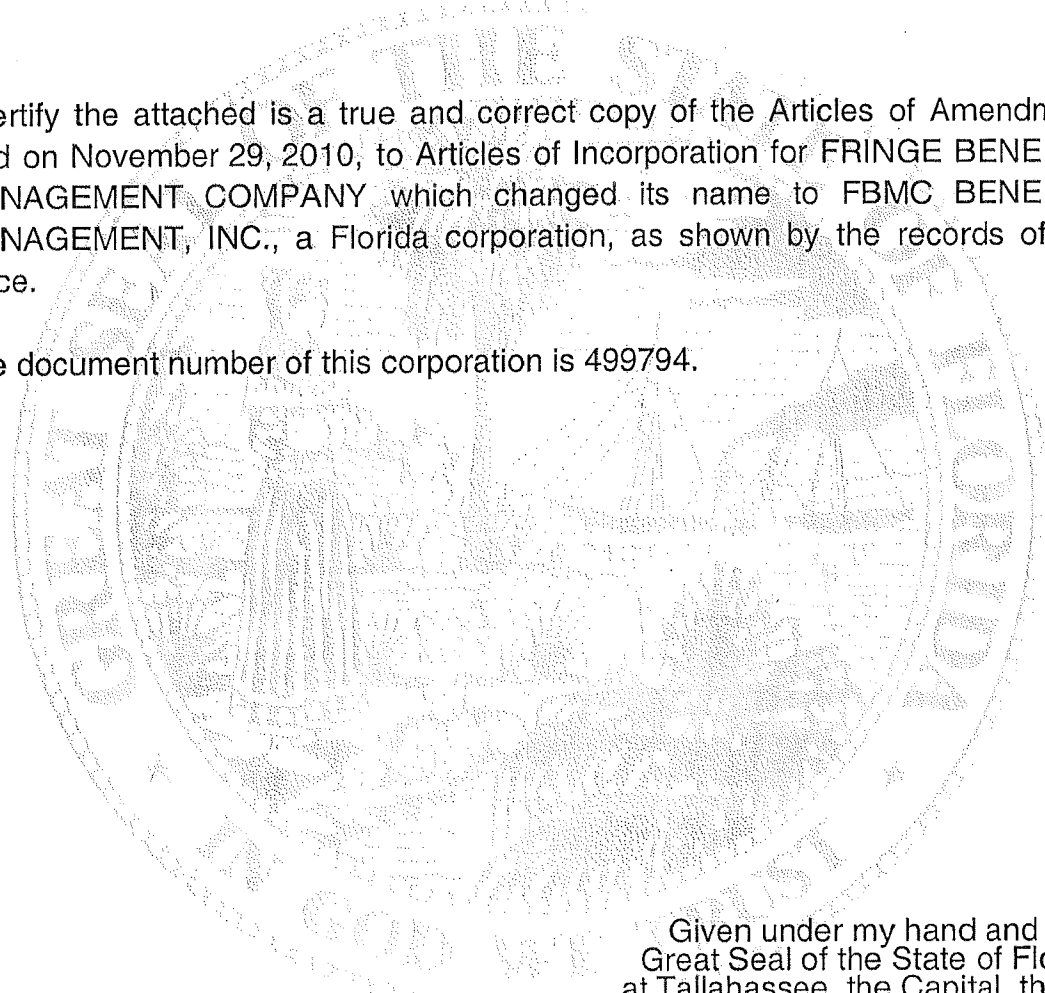
State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Amendment, filed on November 29, 2010, to Articles of Incorporation for FRINGE BENEFITS MANAGEMENT COMPANY which changed its name to FBMC BENEFITS MANAGEMENT, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is 499794.



Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Twenty-ninth day of November, 2010



Dawn K. Roberts
Dawn K. Roberts
Secretary of State

CR2E022 (01-07)

TRADEMARK

REEL: 004441 FRAME: 0439

Articles of Amendment
to
Articles of Incorporation
of

FILED

Fringe Benefits Management Company

(Name of Corporation as currently filed with the Florida Secretary of State) 2010 NOV 29 PM 2:16

499794

(Document Number of Corporation (if known)) SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

FBMC Benefits Management, Inc.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 11-29-10
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

“The number of votes cast for the amendment(s) was/were sufficient for approval

by _____.”
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated November 29, 2010

Signature Patricia K Neely
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Patricia K. Neely
(Typed or printed name of person signing)

Secretary
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2010

Patricia K. Neely
FBMC Benefits Management, Inc.
3101 Sessions Road
Tallahassee, FL 32303

Re: Document Number 499794

The Articles of Amendment to the Articles of Incorporation for FRINGE BENEFITS MANAGEMENT COMPANY which changed its name to FBMC BENEFITS MANAGEMENT, INC., a Florida corporation, were filed on November 29, 2010.

The certification requested is enclosed.

Should you have any question regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Annette Ramsey
Regulatory Specialist II
Division of Corporations

Letter Number: 810A00027686

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

RECORDED: 12/27/2010

TRADEMARK
REEL: 004441 FRAME: 0443