

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM348751

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
ING Institutional Plan Services, LLC		07/31/2014	LIMITED LIABILITY COMPANY: DELAWARE
RECEIVING PARTY DATA			
Name:	Voya Institutional Plan Services, LLC		
Street Address:	5780 Powers Ferry Rd. NW		
City:	Atlanta		
State/Country:	GEORGIA		
Postal Code:	30327		
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	3139164	DIRECTION-FOR-LIFE	
Registration Number:	3722854	WHERE EVERYONE BENEFITS	
Registration Number:	3664221	PLANFIRST	
CORRESPONDENCE DATA			
Fax Number:	8777697945		
<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:	212-765-5070		
Email:	tmdoctc@fr.com		
Correspondent Name:	Catherine Stockell		
Address Line 1:	P.O. Box 1022		
Address Line 4:	Minneapolis, MINNESOTA 55440-1022		
ATTORNEY DOCKET NUMBER:	31309-0092001		
NAME OF SUBMITTER:	Kathy Wolfe, Paralegal for C. Stockell		
SIGNATURE:	/kathy wolfe/		
DATE SIGNED:	07/21/2015		
Total Attachments: 2			
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CH \$90.00 3139164

Delaware

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The First State

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 "ING INSTITUTIONAL PLAN SERVICES, LLC", CHANGING ITS NAME FROM "ING INSTITUTIONAL PLAN SERVICES, LLC" TO "VOYA INSTITUTIONAL PLAN SERVICES, LLC", FILED IN THIS OFFICE ON THE FOURTH DAY OF AUGUST, A.D. 2014, AT 12:15 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF SEPTEMBER, A.D. 2014.

3205036 8100

141085450

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1630589

DATE: 08-19-14

TRADEMARK
REEL: 005581 FRAME: 0664

**AMENDMENT
OF
AMENDED CERTIFICATE OF FORMATION
OF
ING INSTITUTIONAL PLAN SERVICES, LLC**

FIRST: The name of the limited liability company formed hereby is ING Institutional Plan Services, LLC.

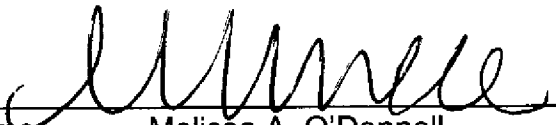
SECOND: The Amended Certificate of Formation of the limited liability company is hereby further amended as follows:

The name of the limited liability company here is Voya Institutional Plan Services, LLC.

THIRD: That this Certificate of Amendment shall be effective as of September 1, 2014.

IN WITNESS WHEREOF, the undersigned has executed this Certificate on the 31st day of July, A.D., 2014.

ING Institutional Plan Services, LLC

By: 
Name: Melissa A. O'Donnell
Its: Assistant Secretary