TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM438568

SUBMISSION TYPE: NEW ASSIGNMENT

ENTITY CONVERSION NATURE OF CONVEYANCE:

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type		
League Collegiate Wear, Inc.		06/24/2016	Corporation: PENNSYLVANIA		

RECEIVING PARTY DATA

Name:	League Collegiate Wear, LLC
Street Address:	401 E. 4th Street, Building 8
Internal Address:	1st Floor
City:	Bridgeport
State/Country:	PENNSYLVANIA
Postal Code:	19405
Entity Type:	Limited Liability Company: DELAWARE

PROPERTY NUMBERS Total: 3

Property Type	Number	Word Mark
Registration Number:	4887682	LEAGUE
Registration Number:	4849279	91
Registration Number:	3071965	REDSHIRT

CORRESPONDENCE DATA

Fax Number: 2158325767

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: 215-569-5767

perry@blankrome.com Email:

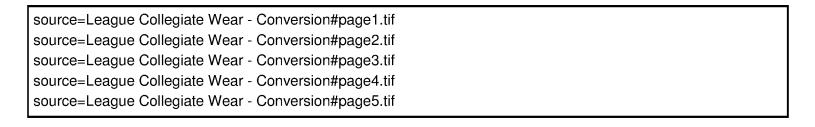
David M. Perry **Correspondent Name:** Address Line 1: One Logan Square

8th Floor Address Line 2:

Address Line 4: Philadelphia, PENNSYLVANIA 19103-6998

ATTORNEY DOCKET NUMBER:	110488-00100
NAME OF SUBMITTER:	David M. Perry
SIGNATURE:	/David M. Perry/
DATE SIGNED:	08/09/2017

Total Attachments: 5



Entity#: 2564285 Date Filed: 06/24/2016 Pedro A. Cortés

Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE **BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

CSC oxder # 191976 - 15	Statement of Conversion					
Name	MENT ON SENSING HERE AND THE DESCRIPTIONS AND THE WAY HOW HAVE AND THE					
Addan						
Corporation Service Company (xx)Return document by email to: cscpa@cscinfe.com	TCO160627JD0361					
Read all instructions	prior to completing.					
Fee: \$70						
In compliance with the requirements of the applicable p conversion), the undersigned association, desiring to effect a c	provisions of 15 Pa.C.S. § 355 (relating to Statement conversion, hereby states that:					
A. For the converting association:						
1. The name of the converting association is: League Co	ilegiate Wear, Inc.					
2. The jurisdiction of formation of the converting associate	ion is: Pennsylvania					
3. The type of association is (check only one):						
	ip					
4. Date on which the association was created, incorporate	d, formed or otherwise came into existence:					
01/26/1994						
(MM/DD/YYYY)						
 If the converting association is a domestic filing association, limited partnership, limited liability compounder which it was first created, incorporated, formed compounder. 	my, professional association or business trust), the sta					
Business Corporation Law of 1988 (ex. Business Corporation Law of 1988, Limited Liability Company	(Law of 1994, etc.)					

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6. Check and complete one of the following addresses for the converting association.

Ø	If the converting association is a domestic filing association, domestic limited liability partnership or registered foreign association, the current registered office address as on file with the Department of State. Complete part (a) OR (b) - not both: (a) 401 E. 4th Street, Building 8, 1st Floor, Bridgeport, Pennsylvania 19405, Montgomery County									
65.3	Number and street		ate Zip	County						
	(b) c/o: Name of Commercial Registere	d Office Provider		County						
	If the converting association is a domestic association that is not a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:									
	Number and street	City St	ate Zip	County						
	any, of its registered or similar of	t nonregistered foreign association, the addresses, if any, required to be maintained by the least registered or similar office, its principal office. City Si	aw of its jurisdictio							
***************************************	Admost the street	Cay 5	rase vib							
	For the converted association: 1. The name of the converted assoc	iation is: League Collegiate Wear, LLC		nder vir noorden onder						
:	2. The jurisdiction of formation of the converted association is: Delaware									
;	3. The type of association is (check	only one):								
	☐ Business Corporation ☐ Limited Partnership ☐ Business Trust ☐ Nonprofit Corporation ☐ Limited Liability (General) Partnership ☐ Professional Association ☑ Limited Liability Company ☐ Limited Liability Limited Partnership ☐ Other									

4. Check and complete one of the following addresses for the converted association.

	If the converted association is a dom- registered foreign association, its regi						híp or			
Ø	(a) 401 E. 4th Street, Buil			Bridgeport,	PA		********			
	Number and street	City		State		Zip	County			
	(b) c/o: Name of Commercial Registered Office	ze Provider	***************************************			**********************	County			
· 🗆	If the converted association is a dome liability partnership, the address, incl						r limited			
	Number and street	City	***************************************	State		Zip	County			
	If the converted association is a nonr (1) The address, including street and m maintained by the law of its jurisdiction office, its principal office address:	umber, if any, of	its register	ed or similar offic	c, if a	ny, requis				
,	Number and street	Сіту		State	~~~~~~	Zip	***************************************			
	(2) The name and address, including st	(2) The name and address, including street and number, of its registered agent:								
	Name of Registered Agent	· · · · · · · · · · · · · · · · · · ·				······································				
	Number and street	City	***********	State	***********	Zip	***************************************			
D. A	Effective date of statement of conversion ☐ This Statement of Conversion shall be ☐ This Statement of Conversion shall be Approval of conversion by converting a ☐ For converting association that is a de ☐ Pa.C.S. Chapter 3, Subchapter E (rela	e effective upon fire effective on: ssociation (checked) mestic entity — Titing to conversion	Date (Mi conly one he plan of	e Department of S M/DD/YYYY)): conversion was a	tate. _at pprove	Hour (if a	ordance with 15			
	For converting association that is a fo of the jurisdiction of formation of the			version was appro)VC0 11	accorga	nce with the law			
E. A	Attachments (see Instructions for require	d and optional att	achments)	•						
	ESTIMONY WHEREOF, the undersigned by a duly authorized officer thereof this		ciation be day of	7	ement	of Convi	ersion to be 20 <u>16</u>			
				Name of Conve	ariure	t LLC sseciation				
				4 44	14 TH					

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		Foreign Registration Statement DSCB:15-412 (7/1/2015)				
Name						
Address						
City Siste Return document by email to:	Zip Code		11 			
Read all instructions prior to compl	leting. This form may b	e submitted online at <u>https:</u>	//www.corporations.pa.gov/.			
Fee: \$250						
In compliance with the require registration statement), the undersigned			412 (relating to foreign			
1. The type of association is (check only	y one):					
☐ Business Corporation ☐ Nonprofit Corporation ☑ Limited Liability Company	☐ Limited Partnersh ☐ Limited Liability ☐ Limited Liability	(General) Partnership	☐ Business Trust ☐ Professional Association			
2. The full and proper name of the forei	gn association as regist	ered in its jurisdiction of fo	rmation is:			
2A. If the name in 2 does not contain a Commonwealth, the alternate name und						
A resolution of the governors adopting the	name in 2A for use in reg	istering to do business in this (Commonwealth must be attached.			
3. The jurisdiction of formation is: De	laware	· .				
4. The street and mailing address of the	association's principal	office.				
401 E. 4th Street, #5, Bridgeport, Penn	sylvania 19405					
Number and street	City	State	Zip			
4A. The street and mailing address of the jurisdiction of formation in that jurisdiction that jurisdiction in that jurisdiction in the jurisdictio		d to be maintained by the la	w of the association's			
Corporation Trust Center, 1209 Orange	Street, Wilmington, De	elaware 19801				
Number and street	City	State	Zip			

DSCB:15-412 - 2

					ion's proposed to county of ve		l office in t	his Commonwe	alth or (b) name of	its Co	mmercial
C	omplete	part (a) OR	(b) - not b	oth:							
(8	401	E.	4th	Street,	Building	8, 1st	Floor,	Bridgeport Se	E, PA	19405,	Mon	tgomery
	Num	ber and	street			City	OR	S	ate	Zip	***************************************	County
											•	
(5) c/o: Na	me of (Comme	rcial Register	ed Office Provide	······································	***************************************	······································	******			County
						•						would,
6.	Check	one of	the fo	llowing:								
		•		may not ha	ve series.							
				-	ne or more se	ri c s.			*			
				·								
7.	Effecti	ve date	e of re	gistration o	f foreign assoc	ciation (che	ck, and if	appropriate com	plete, or	e of the fo	llowin	ıg):
								ng in the Departr				<u> </u>
	The	Foreig	gn Re	gistration S	tatement shall	be effective	c on:	air (MM/DD/YYY		at		*
							D	ate (MM/DD/YYY	Y)		Howr (i	fany)
294	☐The service	associ	iation iation	is a límited	liability comp	any which I limited lia	is not orga	d if appropriate nized to render t pany organized	any of the	ne below p	rofessi ore of	ional
	followi	ng pro	fessio	nal service	(s): (If this box	is checked	d, one or m	ore of the fields	below r	nust be che	cked.)
	Op	iropra otomet ychole	ry		ntistry eopathic medi erinary medic		urgery	_Law _Podiatric medi	cine	Medic Public		d surgery inting
				EREOF, the		association	has cause day of	d this Foreign R	-		ent to t _, 20	
							LEA -{	4-~ (su	ATE WE	belation M	~~~~~	***************************************
							Drei	w Wolf, Presider	t of Sol	e Member		
							*****		Title	***************************************	~~~~~~	

TRADEMARK REEL: 006126 FRAME: 0210

RECORDED: 08/09/2017