

900453198 06/04/2018

**TRADEMARK ASSIGNMENT COVER SHEET**

Electronic Version v1.1  
 Stylesheet Version v1.2

ETAS ID: TM476589

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	MERGER
<b>EFFECTIVE DATE:</b>	12/31/2017
<b>SEQUENCE:</b>	1

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
JRMI, Ltd		12/29/2017	Limited Partnership: TEXAS

**RECEIVING PARTY DATA**

<b>Name:</b>	Royal Paper Products, LLC
<b>Street Address:</b>	420 Clover Mill Road
<b>City:</b>	Exton
<b>State/Country:</b>	PENNSYLVANIA
<b>Postal Code:</b>	19341
<b>Entity Type:</b>	Limited Liability Company: PENNSYLVANIA

**PROPERTY NUMBERS Total: 3**

Property Type	Number	Word Mark
Registration Number:	5435766	CHOICE
Serial Number:	86276364	CHOICE
Serial Number:	87075892	AMER CHOICE

**CORRESPONDENCE DATA**

**Fax Number:** 9723672002  
*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:** 9723672001  
**Email:** tmdocketing@cclaw.com  
**Correspondent Name:** Carstens & Cahoon LLP  
**Address Line 1:** Attn: David W. Carstens  
**Address Line 2:** P.O. Box 802334  
**Address Line 4:** Dallas, TEXAS 75380


<b>NAME OF SUBMITTER:</b>	David W. Carstens
<b>SIGNATURE:</b>	/David W. Carstens/
<b>DATE SIGNED:</b>	06/04/2018
<b>Total Attachments:</b>	6

OP \$90.00 5435766

source=Statement of Merger [Surviving Entity - Royal Paper Products, LLC] - signed 12.29.17#page1.tif  
source=Statement of Merger [Surviving Entity - Royal Paper Products, LLC] - signed 12.29.17#page2.tif  
source=Statement of Merger [Surviving Entity - Royal Paper Products, LLC] - signed 12.29.17#page3.tif  
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source=Statement of Merger [Surviving Entity - Royal Paper Products, LLC] - signed 12.29.17#page5.tif  
source=Statement of Merger [Surviving Entity - Royal Paper Products, LLC] - signed 12.29.17#page6.tif

Entity# : 311252  
Date Filed : 01/02/2018  
Robert Torres  
Acting Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Status of document by <b>CT-COUNTER</b>	Statement of Merger DSCB:15-335 (7/1/2015)
Name <b>10776101 SO 13</b>	
Address <b>nico.ja.grimm@waltersklawwer.com</b>	
City State Zip Code	TCQ180102MC0277
<input type="checkbox"/> Return document by email to:	

Read all instructions p1

Fee: \$70 plus \$40 for each association that is a party to the merger  
The minimum amount to be submitted with this filing is \$150

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 335 (relating to Statement of merger), the undersigned, desiring to effect a merger, hereby states that:

A. For the surviving association:

- The name of the surviving association is: Royal Paper Products, LLC
- The jurisdiction of formation of the surviving association: Pennsylvania
- The type of association of the surviving association is (check only one):
  - Business Corporation
  - Nonprofit Corporation
  - Limited Liability Company
  - Limited Partnership
  - Limited Liability (General) Partnership
  - Limited Liability Limited Partnership
  - Business Trust
  - Professional Association
  - Other \_\_\_\_\_

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PA035 - 7/1/2015 Walters Kluwer Online

2018 JAN -2 AM 9:52  
PA. DEPT. OF STATE

TRADEMARK  
REEL: 006349 FRAME: 0127

4. The surviving association is a (check only one box, provide address and follow instructions for attachments):

Domestic (Pennsylvania) filing entity already in existence on Department of State records  
*If applicable, attach to this Statement any amendment to its public organic record approved as part of the plan of merger.*

NEW domestic (Pennsylvania) filing entity (includes limited liability limited partnership)  
*Attach to this Statement the public organic record of the new entity.*

Foreign filing association or foreign limited liability partnership already registered with the Department.  
*If applicable, attach to this Statement any amendment to or transfer of its foreign registration approved as part of the plan of merger.*

Foreign filing association or foreign limited liability partnership simultaneously seeking registration with the Department of State  
*Attach to this Statement a completed form DSCB:15-411 (Foreign Registration Statement) with applicable fee and attachments.*

Its current registered office address. Complete part (a) OR (b) - not both:

(a) 420 Clover Mill Road                      Exton                      PA    19341 Chester  
Number and street                                      City                                      State                                      Zip                                      County

(b) c/o: \_\_\_\_\_  
Name of Commercial Registered Office Provider                                      County

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NEW domestic (Pennsylvania) limited liability partnership or electing partnership  
*Attach completed DSCB:15-8201 (Statement of Registration) or DSCB:15-8701A (Statement of Election)*

Domestic association that is not a domestic filing association  
*Attach to this Statement tax clearance certificates.*

The address, including street and number, if any, of its principal office:

\_\_\_\_\_

Number and street                                      City                                      State                                      Zip                                      County

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Foreign association that is not, and will not, be registered with the Department of State  
*Attach to this Statement tax clearance certificates.*

The address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office:

\_\_\_\_\_

Number and street                                      City                                      State                                      Zip



DSCU:15-335-4

C. Effective date of statement of merger (check, and if appropriate complete, one of the following):

- This Statement of Merger shall be effective upon filing in the Department of State.
- This Statement of Merger shall be effective on: December 31, 2017 at 11:59 p.m.  
Date (MM/DD/YYYY) Hour (if any)

D. Approval of merger by merging associations (check all applicable statement(s)):

- For domestic entities - The merger was approved in accordance with 15 Pa.C.S. Chapter 3, Subchapter C (relating to merger).
- For foreign associations - The merger was approved in accordance with the laws of the jurisdiction of formation.
- For domestic associations that are not domestic entities - The merger was approved by the interest holders of the merging association in the manner required by its organic law.

E. Attachments (see instructions for required and optional attachments).

IN TESTIMONY WHEREOF, the undersigned merging associations have caused this Statement of Merger to be signed by duly authorized officers thereof this 28th day of December, 20 17.

Royal Paper Products, LLC  
Name of Merging Association

[Signature]  
Signature


Vice President  
Title

Chowares, LLC  
Name of Merging Association

[Signature]  
Signature

Vice President  
Title

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Statement of Merger - Addendum OSCB:15-335AD (7/1/2013)	 335Ad
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This form is used to identify additional merging parties and must be submitted with the Statement of Merger form (OSCB:15-315).

B. For the merging association(s) that are not surviving the merger (continued):

1. The name of the merging association is: IRMI, Ltd.

2. The jurisdiction of formation of the merging association: Texas


3. The type of association is (check only one):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Business Corporation      | <input checked="" type="checkbox"/> Limited Partnership          | <input type="checkbox"/> Business Trust           |
| <input type="checkbox"/> Nonprofit Corporation     | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership   | <input type="checkbox"/> Other                    |

4. Check and complete one of the following addresses.


<input type="checkbox"/>	If the merging 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:
<input type="checkbox"/>	(a) _____ Number and street City State Zip County
<input type="checkbox"/>	(b) c/o: _____ Name of Commercial Registered Office Provider County
<input type="checkbox"/>	If the merging 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:
<input type="checkbox"/>	_____ Number and street City State Zip County
<input checked="" type="checkbox"/>	If the merging association is a nonregistered foreign association, the address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office address:
<input checked="" type="checkbox"/>	<u>1200 Lakeside Parkway, Suite 305, Bldg. 3, Flower Mound, TX 75028</u> Number and street City State Zip

IN TESTIMONY WHEREOF, the undersigned association has caused this Statement of Merger-Addendum to be signed by an authorized officer thereof this 29th day of December, 2017.

IRMI, Ltd.  
 Name of Merging Association  
  
 Signature

Vice President of AmarCare IRMLGP, LLC,  
 Title  
 Its General Partner

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Statement of Merger - Addendum DSCB:15-335AD (7/1/2015)	 335Ad
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This form is used to identify additional merging parties and must be submitted with the Statement of Merger form (DSCB:15-335).

B. For the merging association(s) that are not surviving the merger (continued):

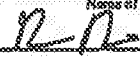
- The name of the merging association is: AmerCare-JRMI GP, LLC
- The jurisdiction of formation of the merging association: Delaware
- The type of association is (check only one):
 

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Business Trust
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> Limited Liability (General) Partnership	<input type="checkbox"/> Professional Association
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Liability Limited Partnership	<input type="checkbox"/> Other _____

4. Check and complete one of the following addresses.

<input type="checkbox"/>	If the merging 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:
<input type="checkbox"/>	(a) _____ <small>Number and street City State Zip County</small>
<input type="checkbox"/>	(b) aka: _____ <small>Name of Commercial Registered Office Provider County</small>
<input type="checkbox"/>	If the merging 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:
<input type="checkbox"/>	_____ <small>Number and street City State Zip County</small>
<input checked="" type="checkbox"/>	If the merging association is a nonregistered foreign association, the address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office address:
<input checked="" type="checkbox"/>	<u>1208 Orange Street</u> <u>Wilmington</u> <u>DE</u> <u>19801</u> <small>Number and street City State Zip</small>

IN TESTIMONY WHEREOF, the undersigned association has caused this Statement of Merger-Addendum to be signed by an authorized officer thereof this 29th day of December, 2017

AmerCare-JRMI GP, LLC  
Name of Merging Association  
  
Signature  
Vice President  
Title