TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1

ETAS ID: TM554580 Stylesheet Version v1.2

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

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Glow Nutrition LLC		01/07/2019	Limited Liability Company: KENTUCKY

RECEIVING PARTY DATA

Name:	Alani Nutrition LLC	
Street Address:	7506 Virginia Ave.	
City:	Louisville	
State/Country:	KENTUCKY	
Postal Code:	40258	
Entity Type:	Limited Liability Company: KENTUCKY	

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	5726640	ALANI NU

CORRESPONDENCE DATA

Fax Number: 5025890309

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: 5025627130

jwatts@wyattfirm.com Email: **Correspondent Name:** Julie Laemmle Watts

500 W. Jefferson Street, Ste. 2800 Address Line 1: Address Line 4: Louisville, KENTUCKY 40202

NAME OF SUBMITTER:	Julie Laemmle Watts
SIGNATURE:	/Julie Laemmle Watts/
DATE SIGNED:	12/23/2019

Total Attachments: 1

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TRADEMARK REEL: 006824 FRAME: 0339

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 1/11/2019 10:22 AM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		of Amendment iability Company)		LLA
Pursuant to the provisions of KF for that purpose, submits the fol			applicant applies to amen	d articles and,
	LLC		ary of State is:	·
(Name must be identical to the name 2. The text of each amendment Name for 6	adopted: With the ladopted: With the ladopted with ladopted with the ladopted with ladopted	secretary of State.) e would like to a Hon LCC to "A	change our Ll Hani Nutrition	LC L
3. The date of adoption of each			condmont (skeet) only	· · · · · · · · · · · · · · · · · · ·
 Mark the appropriate line in the amendment(s) was the articles of organizat 	/were duly adopt	ted by the managerso g agreement of the limited liabili	r members _ 🏒 _ in a	ccordance with
		unless a delayed effective date attended to the application is filed. The o	date and/or time is	The effective date yed effective date and/or time)
6. The individual signing these			beror Manager	······································
Please indicate whether any of the fo ☐ Women Owned ☐ Veteran Ov		our business ownership: ity Owned		
We declare under penalty of pe	rjury under the la	aws of the state of Kentucky tha Max Uemon		1 correct. 1/7/1
Signature of Member, Manager or Au	thorized Party	Printed Name	Title	Date
Signature of Member, Manager or Au	thorized Party	Printed Name	Title	Date
(01/12)				

TRADEMARK REEL: 006824 FRAME: 0340

RECORDED: 12/23/2019