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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM659674

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Delicious Nutritious, Inc.		12/30/2015	Corporation: FLORIDA

RECEIVING PARTY DATA

Name:	Delicious Nutritious LLC
Street Address:	3301 Bonita Beach Rd., Suite 300
City:	Bonita Springs
State/Country:	FLORIDA
Postal Code:	34134
Entity Type:	Limited Liability Company: FLORIDA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	4953027	YOKE

CORRESPONDENCE DATA

Fax Number:

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: 2026638918

Email: dctm@pillsburylaw.com
Correspondent Name: Patrick J. Jennings

Address Line 1: 1200 Seventeenth Street, NW

Address Line 4: Washington, D.C. 20036

Address Line 4: Washington, D.C. 20036

ATTORNEY DOCKET NUMBER:	037285-0439842
NAME OF SUBMITTER:	Patrick J. Jennings
SIGNATURE:	/Pat Jennings/
DATE SIGNED:	07/13/2021

Total Attachments: 5

source=Delicious Nutritious FL Conversion#page1.tif source=Delicious Nutritious FL Conversion#page2.tif source=Delicious Nutritious FL Conversion#page3.tif source=Delicious Nutritious FL Conversion#page4.tif source=Delicious Nutritious FL Conversion#page5.tif

> TRADEMARK REEL: 007353 FRAME: 0555

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Delicious Nutritious LLC	
(Name	e of Resulting Florida Limited Company)
	cles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ng this matter to:
Lynn Giachetti	
(Contact Person)	
Delicious Nutritious (Firm/Company)	
3301 Bonita Beach Road, Suite 300	
(Address)	
Bonita Springs, FL 34134	
(City, State and Zip Code)	
lgiachetti@csiglobalvcard.com	
E-mail Address: (to be used for future annual r	report notifications)
For further information concerning this m	atter, please call:
Lynn Giachetti	at (239) 947-5169
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	and Certified Copy and Certified Copy \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

INHS11 (06/15)

TRADEMARK REEL: 007353 FRAME: 0556

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion Delicious Nutritious Inc.	is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a S Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)
on Cotober 21, 2014 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organiza Delicious Nutritious LLC	tion:
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: December 30, 2015	
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after that date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date in the attached Articles of Organization, if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.	ective
5. The plan of conversion has been approved in accordance with all applicable statutes.	

Page 1 of 2

SEGRETARY OF STATE
BIVISION OF CORPORATIONS
AMAR -8 AMII: 10

Signed this 30th day of December	_ 20_15
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Keith Stone	Title: Managing Member
Signature(s) on behalf of Other Business Entity: [
Signature: Blackette	
Printed Name: Lynn Giachetti	Title: CFO (and Incorporator)
Signature:	
Printed Name:	_ Title:
Signatura	
Signature: Printed Name:	
Signature:Printed Name:	_ Title:
Timed Name.	
Signature:Printed Name:	Title
Printed Name:	11tie:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	Limited Liability Company	is:
Delicious Nutritio	us LLC	
(Must end with the words "Limited Lis	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - A		principal office of the Limited Liability Company is
Principal Office	Address:	Mailing Address:
3301 Bonita Beach	Road, Suite 300	3301 Bonita Beach Road, Suite 300
Bonita Springs, FL ARTICLE III -	34134 Registered Agent, Register	Bonita Springs, FL 34134 red Office, & Registered Agent's Signature:
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Re an active Florida registration.) e Florida street address of the	Bonita Springs, FL 34134 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.) e Florida street address of the Lynn Giachetti	Bonita Springs, FL 34134 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.) e Florida street address of the Lynn Giachetti Na 16689 Wellington Lake Circle	Bonita Springs, FL 34134 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.) e Florida street address of the Lynn Giachetti Na 16689 Wellington Lake Circle	Bonita Springs, FL 34134 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SEGRETARY OF STATE
BIVISION OF CORPORATIONS

"AMBR" = Authorized Mem	ber
"MGR" = Manager MGR	Keith Stone
MOK	3301 Bonita Beach Road, Suite 300
	Bonita Springs, FL 34134
. <u></u> .	
	
effective date is listed, the da	than the date of filing:December 30, 2015 (OPTIONAL te must be specific and cannot be more than five business day
CLE V: Effective date, if other effective date is listed, the dat 0 days after the date of filing. If the date inserted in this block does nt's effective date on the Departmen	than the date of filing:December 30, 2015 (OPTIONAL te must be specific and cannot be more than five business day) not meet the applicable statutory filing requirements, this date will not be list of State's records.
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CLE V: Effective date, if other effective date is listed, the date days after the date of filing. The date inserted in this block does not's effective date on the Department of the Department	than the date of filing:
CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. I the date inserted in this block does nt's effective date on the Department CLE VI: Other provisions, if at REQUIRED SIGNATURE Signature of a This document is exert am aware that any factors.	than the date of filing: December 30, 2015 (OPTIONAL te must be specific and cannot be more than five business day) not meet the applicable statutory filing requirements, this date will not be list of State's records. Ty. member or an authorized representative of a member. State in accordance with section 605.0203 (1) (b), Florida Statutes. The list information submitted in a document to the Department of State
CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. I the date inserted in this block does nt's effective date on the Department CLE VI: Other provisions, if an EEQUIRED SIGNATURE Signature of a This document is exert am aware that any faconstitutes a third deg	than the date of filing: December 30, 2015 (OPTIONAL te must be specific and cannot be more than five business day) not meet the applicable statutory filing requirements, this date will not be list of State's records. Ty. member or an authorized representative of a member. State in accordance with section 605.0203 (1) (b), Florida Statutes. The list information submitted in a document to the Department of State

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·The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

Company:

RECORDED: 07/13/2021

TRADEMARK REEL: 007353 FRAME: 0560