TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM758187

| SUBMISSION TYPE: | RESUBMISSION |
|-----------------------|-------------------|
| NATURE OF CONVEYANCE: | ENTITY CONVERSION |
| RESUBMIT DOCUMENT ID: | 900721080 |

CONVEYING PARTY DATA

| Name | Formerly | Execution Date | Entity Type |
|---------------|----------|----------------|-------------------|
| MINDS ON INC. | | 06/15/2022 | Corporation: OHIO |

RECEIVING PARTY DATA

| Name: | MINDS ON, LLC | |
|-----------------|---------------------------------|--|
| Street Address: | 8864 Whitney Drive | |
| City: | Lewis Center | |
| State/Country: | OHIO | |
| Postal Code: | 43035 | |
| Entity Type: | Limited Liability Company: OHIO | |

PROPERTY NUMBERS Total: 2

| Property Type | Number | Word Mark |
|----------------------|---------|------------------------|
| Registration Number: | 3844823 | MINDS ON |
| Registration Number: | 5864039 | SUPERCHARGE YOUR SALES |

CORRESPONDENCE DATA

Fax Number: 6103718506

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: 6099877050

Email: ejs@stevenslee.com

Correspondent Name: Elliott J Stein Address Line 1: 100 Lenox Drive

Address Line 2: Suite 200

Address Line 4: Lawrenceville, NEW JERSEY 08648

| ATTORNEY DOCKET NUMBER: | 101921.00044 |
|-------------------------|------------------|
| NAME OF SUBMITTER: | Elliott J. Stein |
| SIGNATURE: | /varlawyer/ |
| DATE SIGNED: | 09/29/2022 |

Total Attachments: 4

source=NEWSPRING-MINDS ON -Certificate of Conversion - 06152022#page1.tif source=NEWSPRING-MINDS ON -Certificate of Conversion - 06152022#page2.tif

TRADEMARK REEL: 007812 FRAME: 0159 900722844

source=NEWSPRING-MINDS ON -Certificate of Conversion - 06152022#page3.tif source=NEWSPRING-MINDS ON -Certificate of Conversion - 06152022#page4.tif

TRADEMARK REEL: 007812 FRAME: 0160



DATE 06/15/2022 DOCUMENT ID 202216602348

DESCRIPTION
Conversion Within SOS Records (CVS)

FILING 99.00 300.00

CERT COPY 0.00 0.00

Receipt

This is not a bill. Please do not remit payment.

ANTHONY LAW, LLC 978 S. FRONT ST. COLUMBUS, OH 43206

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

MINDS ON, LLC

and, that said business records show the filing and recording of:

Conversion Within SOS Records

Document No(s):

202216602348

Effective Date: 06/15/2022

CHANGE BUSINESS TYPE OH LLC

Document(s)



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 15th day of June, A.D. 2022.

Ohio Secretary of State

Fil Hau

TRADEMARK
REEL: 007812 FRAME: 0161

Form 700 Prescribed by:



Telphone: 877.767.3453

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

Certificate for Conversion for Entities Converting Within or Off the Records of the Ohio Secretary of State

Filing Fee: \$99
Form Must Be Typed

(CHECK ONLY ONE (1) BOX)

| (1) Secretary of State | e Records of the Ohio | (2) Converting Off The Records of the Ohio Secretary of State (187-VXX) | | | | |
|--|-----------------------|---|--|--|--|--|
| | | | | | | |
| Name of the converting entity | MINDS ON INC. | | | | | |
| Jurisdiction of Formation | | | | | | |
| Charter/Registration Number | 1324113 | | | | | |
| The converting entity is a: (Check Only (1) One Box) | | | | | | |
| Domestic Nonprofit Corpora | ation | Partnership | | | | |
| Domestic For-Profit Corporation | | Domestic Limited Partnership | | | | |
| Foreign Nonprofit Corporation | | Foreign Limited Partnership | | | | |
| Foreign For-Profit Corporation | | Domestic Limited Liability Partnership | | | | |
| Domestic Limited Liability Company | | Foreign Limited Liability Partnership | | | | |
| Foreign Limited Liability Co | mpany | | | | | |
| | | | | | | |
| The converting entity hereby state and that those laws permit the co | • | Il laws in the jurisdiction under which it exists | | | | |

Page 1 of 3

TRADEMARK /2022 **REEL: 007812 FRAME: 0162**

| Name of the converted entity | Minds On, LLC | | ************* | | | |
|---|--|-------------------------------------|---------------|-----------------|----------------|------------|
| Jurisdiction of Formation | | | | | | |
| The converted entity is a: (Check Only (1) One Box) | | | | | | |
| Domestic For-Profit Corp | ooration | | | | | |
| Domestic Professional A If Domestic For-Profit Cor of shares | | stic Professional Associati | on, plea | ase indicate to | tal number | |
| Foreign Nonprofit Corpo | ration | <u> </u> | Part | nership | | |
| Foreign For-Profit Corpo | ration | E | Don | nestic Limited | l Partnershi | ip |
| Domestic Limited Liability | y Company | <u> </u> | Fore | eign Limited F | Partnership | |
| Foreign Limited Liability | Company | | Don | nestic Limited | l Liability Pa | artnership |
| | | tund. | Fore | eign Limited L | iability Part | tnership |
| Effective Date (Optional) Name and address of the person of request. Thomas R. Augustine Name 8864 Whitney Drive Mailing Address Lewis Center City Required information that must | specified in the present of the specified in the | ersion certificate if bo | Ohio State | of conversio | 1 upon writ | ten |
| If the converting entity is a domest address of the statutory agent upo | | | | | e name and | |
| Name of Statutory Agent | | | | | | |
| Mailing Address | | | | | | |
| | | | | ОН | | |
| City | | | | State | ZIP Co | ode |
| See instructions for additional fi (1) the conversion create (2) the converted entity i (3) if a domestic corpora | es a new domesti s a foreign entity | c entity, that desires to transa | | | | |

TRADEMARK /2022 REEL: 007812 FRAME: 0163

| By signing and submitting this forn has the requisite authority to execu | n to the Ohio Secretary of State, the undersigned hereby certifies that he or she Ite this document. |
|--|---|
| Required Must be signed by an authorized representative. | Thomas Augustine Signature |
| addionized representative. | |
| | By (if applicable) |
| | Thomas Augustine |
| | Print Name |
| | |
| | Signature |
| | |
| | By (if applicable) |
| | Print Name |
| | |
| | Signature |
| | By (if applicable) |
| | Print Name |

Form 700 Page 3 of 3 TRADEMARK /2022 RECORDED: 09/20/2022 REEL: 007812 FRAME: 0164