

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM860829

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	MERGER
<b>EFFECTIVE DATE:</b>	12/08/2023

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
QUANEXUS, INC.		12/08/2023	Corporation: OHIO

**RECEIVING PARTY DATA**

<b>Name:</b>	SKYNET INNOVATIONS LLC
<b>Street Address:</b>	8044 Montgomery Road, Suite 510
<b>City:</b>	Cincinnati
<b>State/Country:</b>	OHIO
<b>Postal Code:</b>	45236
<b>Entity Type:</b>	Limited Liability Company: OHIO

**PROPERTY NUMBERS Total: 1**

Property Type	Number	Word Mark
<b>Registration Number:</b>	4742192	QUANEXUS WE MAKE IT EASY

**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:** 2164133838  
**Email:** natalia.ovak@dinsmore.com  
**Correspondent Name:** Natalia Ovak  
**Address Line 1:** 1001 Lakeside Avenue East  
**Address Line 4:** Cleveland, OHIO 44114

<b>NAME OF SUBMITTER:</b>	Sean T. Price
<b>SIGNATURE:</b>	/Sean T. Price/
<b>DATE SIGNED:</b>	12/13/2023

**Total Attachments: 10**

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DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
12/08/2023	202334200998	Merger (MER)	99.00	300.00	0.00	0.00

**Receipt**

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

NATIONAL SERVICE INFORMATION, INC.  
145 BAKER STREET  
MARION, OH 43302

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose  
1788043**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for  
**SKYNET INNOVATIONS LLC**

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

Document(s)  
**Merger**

Document No(s):  
**202334200998**

Effective Date: **12/08/2023**



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  
8th day of December, A.D. 2023.

*Frank LaRose*  
**Ohio Secretary of State**

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
12/08/2023	202334200998	MERGED OUT OF EXISTENCE (MEX)	0.00	0.00	0.00	0.00

**Receipt**

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

NATIONAL SERVICE INFORMATION, INC.  
145 BAKER STREET  
MARION, OH 43302

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose  
831448**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for  
**QUANEXUS, INC.**

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

Document(s)

**MERGED OUT OF EXISTENCE**

Effective Date: 12/08/2023

Document No(s):

**202334200998**



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  
8th day of December, A.D. 2023.

A handwritten signature in cursive script, appearing to read "Frank LaRose".

**Ohio Secretary of State**

Form 551 Prescribed by:



Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

### Certificate of Merger

**Filing Fee: \$99**

**(154-MER)**

**Forms Must Be Typed**

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan associations, limited liability companies, partnerships, limited partnerships and/or limited liability partnerships, desiring to effect a merger, set forth the following facts

**I. (Surviving) Entity**

A. Name of Entity Surviving the Merger

Skynet Innovations LLC

B. Name Change: As a result of this merger, the name of the surviving entity has changed to the following

[Empty text box for name change]

(Complete only if name of surviving entity is changing through the merger)

C. The surviving entity is a (Please check the appropriate box and fill in the appropriate blanks)

- 1.  Domestic (Ohio entity)       Foreign (Non-Ohio Entity)

[Empty text box for jurisdiction of formation]

Jurisdiction of formation

2. Charter/Registration/License Number

1788043

(If licensed in Ohio as domestic or foreign)

- 3.  For-Profit Corporation
- Nonprofit Corporation
- Limited Liability Company
- Partnership
- Limited Partnership
- Limited Liability Partnership
- Unincorporated Nonprofit Association

**II. CONSTITUENT ENTITY**

Provide the name, Ohio charter/license/registration number, type of entity, jurisdiction of formation, for each entity merging out of existence. (If this is insufficient space to reflect all merging entities, please attach a separate sheet listing the additional merging entities).

Entity Name	Ohio Charter/License/Registration Number	Jurisdiction of Formation	Type of Entity
Quanexus, Inc.	831448	Ohio	Corporation

**III. MERGER AGREEMENT ON FILE**

The name and mailing address of the person or entity from whom/which eligible persons may obtain a copy of the merger agreement upon written request

Dinsmore & Shohl LLP

Name

255 E. Fifth St. Ste. 1900

Mailing Address

Cincinnati

City

Ohio

State

45202

Zip Code

**IV. EFFECTIVE DATE OF MERGER**

This merger is to be effective on  (The date specified must be on or after the date of the filing. If no date is specified, the date of filing will be the effective date of the merger).

**V. MERGER AUTHORIZED**

Each constituent entity has complied with the laws under which it exists and the laws permit the merger. The agreement of merger is authorized on behalf of each constituent entity and each person who signed the certificate on behalf of each entity is authorized to do so.

**VI. STATEMENT OF MERGER**

Upon filing this Certificate of Merger, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed surviving entity.

**VII. STATUTORY AGENT - To be filed ONLY if the surviving entity is a foreign entity not licensed in Ohio.**  
 If the surviving entity is a foreign entity NOT licensed to transact business in Ohio, provide the name and address of a statutory agent upon whom any process, notice or demand may be served.

Name of Statutory Agent

Mailing Address

City

State

ZIP Code

**VIII. AMENDMENTS**

If a domestic corporation, limited liability company or limited partnership survives the merger, any amendments to the entity's articles of incorporation, articles of organization, or certificate of limited partnership of the surviving domestic entity shall be filed with the certificate of merger.

Amendments are attached

No Amendments

**If you are amending the total number of shares, please complete this box so the appropriate filing fee is charged.**

Total number of shares previously listed in the Articles or other Amendments with the Ohio Secretary of State:

With the submission of this amendment, NEW total number of shares:

**IX. REQUIREMENTS OF CORPORATIONS MERGING OUT OF EXISTENCE**

If a domestic corporation or foreign corporation licensed to transact business in Ohio is a constituent entity and the surviving entity is not a domestic corporation or foreign corporation to be licensed in Ohio, the certificate of merger must be accompanied by the affidavits, receipts, certificates, or other evidence required by division (H) of section 1701.86 division (G) of section 1702.47 of the Revised Code with respect to each domestic constituent corporation, and/or by the affidavits, receipts, certificates, or other evidence required by division (C) or (D) of section 1703.17 of the Revised Code with respect to each foreign constituent corporation licensed to transact business in Ohio.

**X. QUALIFICATION OR LICENSE OF FOREIGN SURVIVING ENTITY**

A surviving foreign entity that wishes to qualify in Ohio as part of the merger must file an additional form, as listed below, but no additional filing fee is required.

- Foreign Qualifying Corporation - Form 530A or B and Certificate of Good Standing
- Foreign Notice (if qualifying entity is a foreign bank, savings bank, or savings and loan association) - Form 552
- Foreign Qualifying Limited Liability Company - Form 617
- Foreign Qualifying Limited Partnership - Form 531B
- Foreign Qualifying Limited Liability Partnership - Form 537 and Evidence of Existence in Jurisdiction of Formation

The undersigned constituent entities (constituent entities include all merging and surviving entities) have caused this certificate of merger to be signed by their duly authorized officers, partners and representatives.

SkyNet Innovations LLC

Name of entity

By: See attached

Signature

Its: Authorized Representative

Title

Quanexus, Inc.

Name of entity

By: See attached

Signature

Its: Chief Executive Officer, President, and Secretary

Title

Name of entity

By:

Signature

Its:

Title

An authorized representative of each constituent corporation, partnership, or entity must sign the merger certificate (ORC 1701.81(A), 1702.43 (A), 1706.712(A), 1776.70(A), 1782.433(A)). this includes all merging and surviving entities.



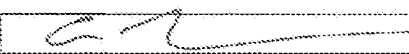
The undersigned constituent entities (constituent entities include all merging and surviving entities) have caused this certificate of merger to be signed by their duly authorized officers, partners and representatives.

SkyNet Innovations LLC  
Name of entity

By:   
Signature

Its: Authorized Representative  
Title

Quanexus, Inc.  
Name of entity

By:   
Signature

Its: Chief Executive Officer, President, and Secretary  
Title

Name of entity

By:   
Signature

Its:   
Title

An authorized representative of each constituent corporation, partnership, or entity must sign the merger certificate (ORC 1701.81(A), 1762.43 (A), 1706.712(A), 1776.70(A), 1762.433(A)). this includes all merging and surviving entities.

Complete the information in this section. **AFFIDAVIT**

In lieu of dissolution releases from various governmental authorities.

Quanexus, Inc.  
Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.

<p><b>Agency</b> Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215</p> <p><b>Date Notified (MM/DD/YYYY)</b> 09/01/2023</p> <p><small>* Only required for domestic for-profit corporations</small></p>	<p><b>Agency</b> Ohio Job &amp; Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319</p> <p><b>Date Notified (MM/DD/YYYY)</b> 09/01/2023</p> <p><b>Overnight Address:</b> P.O. Box 182413 Columbus, OH 43218-2413</p> <p><b>Regular Address:</b> P.O. Box 182413 Columbus, OH 43218-2413</p>
<p><b>Agency</b> Ohio Department of Taxation Taxpayer Services/Tax Release Unit P.O. Box 182382 Columbus, OH 43218-2382 Dissolution@tax.state.oh.us</p> <p><b>Date Notified (MM/DD/YYYY)</b> [ ]</p> <p><small>* Complete this state notified field only if the corporation is a domestic non-profit corporation or foreign corporation. * Note: Domestic for-profit corporations must submit with this filing a Certificate of Tax Clearance issued by the Ohio Department of Taxation.</small></p>	<p><input type="checkbox"/> The corporation is not required to pay or the department of taxation has not assessed any personal property tax.</p>

Note: This affidavit must be signed by the person executing the certificate or by an officer of the corporation.

Signature [Signature] Title CEO, President, and Secretary

Andrew N. Recker  
Name

8044 Montgomery Road, Suite 510  
Mailing Address

Cincinnati City Ohio State 45236 ZIP Code

State of Ohio

County of Hamilton

Sworn to or affirmed and subscribed before me by Andrew N. Recker  
Name of person making oath or affirmation



KATHLEEN A. FORMAN  
Notary Public, State of Ohio  
My Commission Expires 11-15-2024

09/29/2023  
Today's Date (MM/DD/YYYY)

[Signature]  
Notary Public's Signature

11/15/2024  
Expiration Date of Notary's Commission (MM/DD/YYYY)

**AFFIDAVIT OF PERSONAL PROPERTY**

State of Ohio

County of Hamilton

Andrew N. Recker  
Name of Officer

CEO, President, and Secretary  
Title of Officer

of Quanexus, Inc.  
Name of Corporation

and that this affidavit is made in compliance with Ohio Revised Code Section 1701.86(H)

That above-named corporation: (Check one (1) of the following)

- Has no personal property in any county in Ohio
- Is the type required to pay personal property taxes to state authorities only
- Has personal property in the following county (ies)

Montgomery County                           County                           County

Signature [Signature] Title CEO, President, and Secretary

Sworn to or affirmed and subscribed before me by Andrew N. Recker  
*Name of person making oath or affirmation*

on this date 08/29/2023  
*Today's Date (MM/DD/YYYY)*

NOTARY SEAL



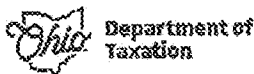
**KATHLEEN A. FORMAN**  
Notary Public, State of Ohio  
My Commission Expires 11-15-2024

[Signature]  
*Notary Public's Signature*  
11-15-2024  
*Expiration Date of Notary's Commission (MM/DD/YYYY)*

DEC. 7. 2023 10:17AM

OH DEPT OF TAXATION

NO. 989 P. 1



PO Box 182382  
Columbus, OH 43218-2382  
tax.ohio.gov



CHRISTOPHER M. HAMMOND  
DINSMORE & SHOHL LLP  
191 W NATIONWIDE BLVD STE 200  
COLUMBUS, OH 43215  
USA

December 04, 2023  
Contact ID: 2861320487

RE: Certificate of Tax Clearance  
Entity Name: Quanexus Inc  
Ohio Charter #: 00831448  
Certificate Issue Date: 12/04/2023

Up to and including the certificate issue date, all taxes administered by the Tax Commissioner have been filed and paid in full.

This certificate does not preclude the Department from issuing a bill and/or assessment, for any tax returns and/or tax liabilities and fees becoming due, after the certificate issue date. Also, this certificate does not preclude the Department from examining or auditing any period.

This Certificate of Tax Clearance is valid for thirty (30) days after issuance. The Ohio Secretary of State requires it to be submitted with their prescribed forms.

Patricia Harris  
Tax Commissioner

If responding to this notice, please use one of the following options:

- Electronically: Online Notice Response Service (ONRS) at [gateway.ohio.gov](http://gateway.ohio.gov) or [tax.ohio.gov/ONRS](http://tax.ohio.gov/ONRS)
- Email: [Dissolution@tax.ohio.gov](mailto:Dissolution@tax.ohio.gov)
- eFax: 1-206-984-0378
- Mail: Ohio Department of Taxation, PO Box 182382, Columbus, OH 43218-2382

Please contact the Department with any questions.

Tax Release Unit  
Phone: 1-855-995-4422  
TTY/TDD: 1-800-750-0750

TRAT0001

1 of 1

Form Name: Tax Release Notice Response - D5