

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM870034

|   |                                     |                       |                                     |
|---|-------------------------------------|-----------------------|-------------------------------------|
| <b>SUBMISSION TYPE:</b>   | NEW ASSIGNMENT                      |                       |                                     |
| <b>NATURE OF CONVEYANCE:</b>  | CHANGE OF NAME                      |                       |                                     |
| <b>SEQUENCE:</b>  | 2                                   |                       |                                     |
| <b>CONVEYING PARTY DATA</b>   |                                     |                       |                                     |
| <b>Name</b>   | <b>Formerly</b>                     | <b>Execution Date</b> | <b>Entity Type</b>                  |
| Claims Automation Company, LLC  |                                     | 03/18/2022            | Limited Liability Company: DELAWARE |
| <b>RECEIVING PARTY DATA</b>   |                                     |                       |                                     |
| <b>Name:</b>  | Alpine Intel, LLC                   |                       |                                     |
| <b>Street Address:</b>  | 1633 Broadway, 48th floor           |                       |                                     |
| <b>City:</b>  | New York                            |                       |                                     |
| <b>State/Country:</b>   | NEW YORK                            |                       |                                     |
| <b>Postal Code:</b>   | 10019                               |                       |                                     |
| <b>Entity Type:</b>   | Limited Liability Company: DELAWARE |                       |                                     |
| <b>PROPERTY NUMBERS Total: 2</b>  |                                     |                       |                                     |
| <b>Property Type</b>  | <b>Number</b>                       | <b>Word Mark</b>      |                                     |
| <b>Registration Number:</b>   | 6259952                             | CCGIQ                 |                                     |
| <b>Registration Number:</b>   | 6259953                             |                       |                                     |
| <b>CORRESPONDENCE DATA</b>  |                                     |                       |                                     |
| <b>Fax Number:</b>  | 6172359493                          |                       |                                     |
| <i>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.</i> |                                     |                       |                                     |
| <b>Phone:</b>   | 212-596-9287                        |                       |                                     |
| <b>Email:</b>   | ustrademarkmail@ropesgray.com       |                       |                                     |
| <b>Correspondent Name:</b>  | Nicole Mollica, Ropes & Gray LLP    |                       |                                     |
| <b>Address Line 1:</b>  | 1211 Avenue of the Americas         |                       |                                     |
| <b>Address Line 4:</b>  | New York, NEW YORK 10036            |                       |                                     |
| <b>ATTORNEY DOCKET NUMBER:</b>  | 118050-0004                         |                       |                                     |
| <b>NAME OF SUBMITTER:</b>   | Nicole Mollica                      |                       |                                     |
| <b>SIGNATURE:</b>   | /nicole mollica/                    |                       |                                     |
| <b>DATE SIGNED:</b>   | 01/22/2024                          |                       |                                     |
| <b>Total Attachments: 3</b>   |                                     |                       |                                     |
| source=Name Change Claims Automation Company LLC to Alpine Intel LLC#page1.tif  |                                     |                       |                                     |
| source=Name Change Claims Automation Company LLC to Alpine Intel LLC#page2.tif  |                                     |                       |                                     |

CH \$65.00 6259952



# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CLAIMS AUTOMATION COMPANY, LLC", CHANGING ITS NAME FROM "CLAIMS AUTOMATION COMPANY, LLC" TO "ALPINE INTEL, LLC", FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF MARCH, A.D. 2022, AT 2:17 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

6353915 8100  
SR# 20221066621

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202954815  
Date: 03-18-22

**TRADEMARK**  
**REEL: 008322 FRAME: 0947**

STATE *of* DELAWARE

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CERTIFICATE OF AMENDMENT  
OF  
CERTIFICATE OF FORMATION  
OF  
CLAIMS AUTOMATION COMPANY, LLC

March 18, 2022

The undersigned, desiring to amend the Certificate of Formation of Claims Automation Company, LLC (the "Company") pursuant to the provisions of Section 18-202 of the Limited Liability Company Act of the State of Delaware, does hereby certify as follows:

- (1) The name of the limited liability company is Claims Automation Company, LLC.
- (2) The Company was formed on March 20, 2017.
- (3) Article 1 of the Certificate of Formation of the Company is hereby amended as follows:

"The name of the limited liability company is **Alpine Intel, LLC** (the "*Company*")."

*[The remainder of the page is intentionally left blank]*

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment of the Certificate of Formation as of the date first written above.



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Name: Mathew Dubbioso  
Title: Vice President and  
Assistant Secretary

*[Certificate of Amendment (Claims Automation Company Name Change)]*