

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT2711460

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	TRADE NAME FILING
CONVEYING PARTY DATA	
Name	Execution Date
AREAWARE, INC.	12/24/2013
RECEIVING PARTY DATA	
Name:	THE HEREAFTER, INC. D/B/A AREAWARE, INC.
Street Address:	232 NEILSTON STREET
City:	COLUMBUS
State/Country:	OHIO
Postal Code:	43215
PROPERTY NUMBERS Total: 6	
Property Type	Number
Application Number:	29435285
Application Number:	29436357
Application Number:	29439261
Application Number:	29472811
Application Number:	29472792
Application Number:	29477129
CORRESPONDENCE DATA	
Fax Number:	(646)349-2782
Phone:	2124818686
Email:	docket@sabety.net
<i>Correspondence will be sent via US Mail when the email attempt is unsuccessful.</i>	
Correspondent Name:	TED SABETY
Address Line 1:	SABETY + ASSOCIATES PLLC
Address Line 2:	8 WEST 40TH STREET, 12TH FLOOR
Address Line 4:	NEW YORK, NEW YORK 10018
ATTORNEY DOCKET NUMBER:	AW 1 2 3 4 5 6

PATENT

NAME OF SUBMITTER:	TED SABETY
Signature:	/ts/
Date:	02/04/2014
Total Attachments: 3 source=Areaware DBA Filing Ohio 2013#page1.tif source=Areaware DBA Filing Ohio 2013#page2.tif source=Areaware DBA Filing Ohio 2013#page3.tif	



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/24/2013	201335702088	TRADE NAME/ORIGINAL FILING (RNO)	50.00	.00		.00	.00

Receipt

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

AREAWARE
 SAL CARADONNA
 232 NEILSTON STREET
 COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

2255434

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

THE HEREAFTER, INC. D/B/A AREAWARE, INC.

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

Document(s)

TRADE NAME/ORIGINAL FILING

Document No(s):

201335702088

Effective Date: 12/20/2013

Date of First Use: 01/01/2005
 Expiration Date: 12/20/2018

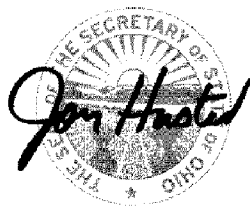
THE HEREAFTER, INC.
 232 NEILSTON STREET
 COLUMBUS, OH 43215



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 24th day of December,
 A.D. 2013.

Ohio Secretary of State



Form 534A Prescribed by:
JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mall this form to one of the following:

Regular Filing (non expedite)
P.O. Box 670
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Name Registration

Filing Fee: \$50

2013 DEC 20 PM 2:16

CHECK ONLY ONE (1) Box

Trade Name
(167-RNO)

Date of first use:
MM/DD/YYYY

Fictitious Name
(169-NFO)

Name being Registered or Reported

Name of the Registrant

Note: If the registrant is a partnership, please provide the name of the partnership. Individual partner names are not permitted but are required on page 2 of the form.

Registrant's Entity Number (if registered with Ohio Secretary of State):

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Business address:

Mailing Address

City

State

Zip Code

Complete the information in this section if registrant is a partnership NOT registered in Ohio pursuant to ORC 1776, if partnership is registered, provide registration number on page one.

Provide the name and address of at least one general partner:

Name

Address

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Application must be signed by the registrant or an authorized representative.

Lisa Yashon
Signature

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

By (if applicable)

Lisa Yashon
Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.