

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT4082926

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
URBAN TREND, LLC	08/11/2015
RECEIVING PARTY DATA	
Name:	UT BRANDS, LLC
Street Address:	270 EAST BAKER STREET
Internal Address:	STE 300
City:	COSTA MESA
State/Country:	CALIFORNIA
Postal Code:	92626
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	29474982
CORRESPONDENCE DATA	
Fax Number:	(480)325-1365
<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>	
Phone:	4803251565
Email:	MWHITTINGTON3142@GMAIL.COM
Correspondent Name:	MICHELLE WHITTINGTON
Address Line 1:	3142 N 82ND WAY
Address Line 4:	MESA, ARIZONA 85207
ATTORNEY DOCKET NUMBER:	UT-15-007
NAME OF SUBMITTER:	MICHELLE WHITTINGTON
SIGNATURE:	/michellewhittington/
DATE SIGNED:	10/04/2016
Total Attachments: 2	
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source=URBAN TREND TO UT BRANDS (8-11-15)#page2.tif	

LLC-2

Amendment to Articles of Organization of a Limited Liability Company (LLC)

To change information of record for your California LLC, you can fill out this form, and submit for filing along with:

- A \$30 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.
- To file this form, the status of your LLC must be active on the records of the California Secretary of State, or if suspended, this form can only be filed to list a new LLC name. To check the status of the LLC, go to kepler.sos.ca.gov.

Important! To change the LLC addresses, or to change the name or address of the LLC's agent for service of process, you must file a Statement of Information (Form LLC-12). To get Form LLC-12, go to www.sos.ca.gov/business/be/statements.htm.

Items 4-6: Only fill out the information that is changing. Attach extra pages if you need more space or need to include any other matters.

FILED
Secretary of State
State of California

AUG 11 2015

This Space For Office Use Only

For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm.

① **LLC's Exact Name** (on file with CA Secretary of State)

URBAN TREND, LLC

② **LLC File No.** (issued by CA Secretary of State)

200303010028

Purpose

- ③ The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

New LLC Name (List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State.)

④ **UT BRANDS, LLC**

Proposed LLC Name

The proposed new name must include: LLC, L.L.C., Limited Liability Company, Limited Liability Co., Ltd. Liability Co. or Ltd. Liability Company; and may not include: bank, trust, trustee, incorporated, inc., corporation, or corp., insurer, or insurance company.

Management (Check only one.)

- ⑤ The LLC will be managed by:
- ☐ One Manager ☐ More Than One Manager ☐ All Limited Liability Company Member(s)

Amendment to Text of the Articles of Organization (List both the current text, and the text as amended by this filing.)

⑥

Read and sign below: Unless a greater number is provided for in the Articles of Organization, this form must be signed by at least one manager, if the LLC is manager-managed or at least one member, if the LLC is member-managed. If the signing manager or member is a trust or another entity, go to www.sos.ca.gov/business/be/filing-tips.htm for more information. If you need more space, attach extra pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All attachments are part of this document.

Sign here

Michael Stoll

Print your name here

Manager

Your business title

Make check/money order payable to: **Secretary of State**
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

By Mail
Secretary of State
Business Entities, P.O. Box 944228
Sacramento, CA 94244-2280

Drop-Off
Secretary of State
1500 11th Street., 3rd Floor
Sacramento, CA 95814

16-736691

FILED

Secretary of State
State of California

MAY 31 2016

Secretary of State
Statement of Information
(Limited Liability Company)

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LLC-12

IMPORTANT — Read instructions before completing this form.

Filing Fee - \$20.00

Copy Fees - Face Page \$1.00 & .50 for each attachment page,
Certification Fee - \$5.00NF
This Space For Office Use Only

1. Limited Liability Company Name

UT BRANDS, LLC

2. 12-Digit Secretary of State File Number

200303010028

3. State or Place of Organization (only if formed outside of California)

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box

270 E Baker Street Suite 300

City (no abbreviations)

Costa Mesa

State

CA

Zip Code

92626

b. Mailing Address of LLC, if different than Item 4a

City (no abbreviations)

State

Zip Code

c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box

City (no abbreviations)

State

CA

Zip Code

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. Attach additional pages, if necessary.

a. First Name

Michael

Middle Name

Last Name

Stoll

Suffix

b. Address

270 E Baker Street Suite 300

City (no abbreviations)

Costa Mesa

State

CA

Zip Code

92526

6. Agent for Service of Process

Item 6a and 6b: If the agent is an individual, the agent must reside in California and Item 6a and 6b must be completed with the agent's name and California address. Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 6c must be completed (leave Item 6a-6b blank).

a. California Agent's First Name (if agent is not a corporation)

Craig

Middle Name

A

Last Name

Barbarosh

Suffix

Esq

b. Street Address (if agent is not a corporation) - Do not list a P.O. Box

100 Spectrum Center Drive Suite 1050

City (no abbreviations)

Irvine

State

CA

Zip Code

92618-496

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 6a or 6b

7. Type of Business

a. Describe the type of business or services of the Limited Liability Company

Sales and distribution

8. Chief Executive Officer, if elected or appointed

a. First Name

Michael

Middle Name

Last Name

Stoll

Suffix

b. Address

270 E Baker Street Suite 300

City (no abbreviations)

Costa Mesa

State

CA

Zip Code

92626

9. The information contained herein, including any attachments, is true and correct.

5/25/2016

Peggy Eckman

Bookkeeper

Date

Type or Print Name of Person Completing the Form

Title

Signature

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

Name:

Company:

Address:

City/State/Zip:

PATENT

RECORDED: 10/04/2016

REEL: 040224 FRAME: 0408