

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5129624

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
EDIBLE ARRANGEMENTS, LLC	04/21/2017
RECEIVING PARTY DATA	
Name:	EDIBLE LLP, LLC
Street Address:	95 BARNES ROAD
City:	WALLINGFORD
State/Country:	CONNECTICUT
Postal Code:	06492
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	29649833
CORRESPONDENCE DATA	
Fax Number:	(703)773-4200
<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:	7037734000
Email:	patentprosecutionres@dlapiper.com
Correspondent Name:	AMRITAA GANGULY
Address Line 1:	DLA PIPER LLP US
Address Line 2:	11911 FREEDOM DR., SUITE 300
Address Line 4:	RESTON, VIRGINIA 20190
ATTORNEY DOCKET NUMBER:	EDI-066 DIV
NAME OF SUBMITTER:	BERT LEE
SIGNATURE:	/Bert Lee/
DATE SIGNED:	09/07/2018
Total Attachments: 2	
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SECRETARY OF THE STATE

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONN

DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 06106

PHONE: 860-509-8003

WEBSITE: www.concord-sps.ct.gov

FILING #0005823740 PG 01 OF 01 VOL B-02338
FILED 04/21/2017 12:00 PM PAGE 01518
SECRETARY OF THE STATE
CONNECTICUT SECRETARY OF THE STATE

ARTICLES OF AMENDMENT Limited Liability Company-DOMESTIC

C.G.S. §§34-109; 34-122

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 8 1/2 X 11 SHEETS IF NECESSARY.

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS): NAME: Susan Stearns ADDRESS: 95 Barnes Road CITY: Wallingford STATE: CT ZIP: 06492		FILING FEE: \$120 MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"
1. NAME OF LIMITED LIABILITY COMPANY - REQUIRED: (MUST MATCH OUR CURRENT RECORDS EXACTLY WITH DESIGNATION SUCH AS L.L.C., LLC, ETC.) EDIBLE ARRANGEMENTS, LLC		
2. THE LIMITED LIABILITY COMPANY'S ARTICLE OF ORGANIZATION ARE (CHECK A, B, C OR D) - REQUIRED: <input checked="" type="checkbox"/> A. AMENDED, NAME ONLY: Edible IP, LLC (SPECIFY NEW NAME. MUST INCLUDE BUSINESS DESIGNATION SUCH AS: L.L.C., LLC, ETC.) <input type="checkbox"/> B. AMENDED: ANY AMENDMENTS TO THE ARTICLES OF ORGANIZATION. <input type="checkbox"/> C. AMENDED AND RESTATED: PROVIDE THE TEXT OF EACH AMENDMENT FOLLOWED BY A COMPLETE RESTATEMENT OF THE LIMITED LIABILITY COMPANY'S ARTICLES OF ORGANIZATION. <input type="checkbox"/> D. RESTATED: INTEGRATION OF ALL PREVIOUS AMENDMENTS TO THE ARTICLES OF ORGANIZATION INTO ONE DOCUMENT.		
3. FULL TEXT OF EACH AMENDMENT / RESTATEMENT - REQUIRED: (NOTE: IF YOU ARE AMENDING THE BUSINESS NAME ONLY, COMPLETE SECTION 2A AND YOU MAY LEAVE THIS SECTION BLANK.) <div style="text-align: center;">CITIZENSHIP TULSA</div>		
4. EXECUTION - REQUIRED: (SUBJECT TO PENALTY OF FALSE STATEMENT)		
DATED THIS 20 DAY OF April 2017		
NAME OF SIGNATORY (print/type)	CAPACITY/TITLE OF SIGNATORY	SIGNATURE
Tariq Farid	Authorized Signatory	

STATE OF CONNECTICUT }
OFFICE OF THE SECRETARY OF THE STATE } SS. HARTFORD

I hereby certify that this is a true copy of record
in this Office.

In Testimony whereof, I have hereunto set my hand,
and affixed the Seal of said State, at Hartford,

this 24th day of April A.D. 2017



SECRETARY OF THE STATE