### TRADEMARK ASSIGNMENT

# Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

### **CONVEYING PARTY DATA**

Name Formerly		Execution Date	Entity Type
Catamaran Inc.	FORMERLY SXC Health Solutions, Inc.	12/04/2012	CORPORATION: TEXAS

### RECEIVING PARTY DATA

Name:	Catamaran LLC
Street Address:	2441 Warrenville Road
Internal Address:	Suite 610
City:	Lisle
State/Country:	ILLINOIS
Postal Code:	60532-3642
Entity Type:	LIMITED LIABILITY COMPANY: TEXAS

### PROPERTY NUMBERS Total: 35

Property Type	Number	Word Mark
Serial Number:	86064366	A HANDS ON APPROACHTO PERSONALIZED CA
Serial Number:	85654690	C CATAMARAN STAY WELL AHEAD
Serial Number:	85962944	THE CATAMARAN DIFFERENCE
Serial Number:	85957985	A HANDS-ON APPROACH TO PERSONALIZED CARE
Serial Number:	85214221	RXBUILDER
Serial Number:	85669484	BRIOVA RX
Serial Number:	85654724	С
Serial Number:	85669459	BRIOVA
Serial Number:	85978290	CATAMARAN
Serial Number:	85625926	CATAMARAN
Serial Number:	85654697	C CATAMARAN
Serial Number:	85979288	C CATAMARAN
Serial Number:	85979287	C CATAMARAN
		TDADEMADIZ

TRADEMARK **REEL: 005138 FRAME: 0565** 

900269902

Serial Number:	85654663	C CATAMARAN
Serial Number:	85654706	C CATAMARAN STAY WELL AHEAD
Serial Number:	85762341	CATAMARAN HOME DELIVERY
Serial Number:	85037488	RXTRACK
Serial Number:	85321952	ASCEND SPECIALTY
Serial Number:	85037466	RXCLAIM SUITE
Serial Number:	85037476	RXCLAIM SUITE
Serial Number:	85037461	RXCLAIM
Serial Number:	85605363	ASCEND
Serial Number:	85108284	RXPARALLEL
Serial Number:	85037865	SXC HEALTH SOLUTIONS CORP.
Serial Number:	85037482	RXSERVER
Serial Number:	85037449	HEALTHCARE IT GROUP OUR SOLUTIONS DRIVE
Serial Number:	85010747	OUR SOLUTIONS DRIVE YOUR SUCCESS
Serial Number:	85007438	MOVE AHEAD
Serial Number:	77832189	SXC, THE TECHNOLOGY-ENABLED PBM
Serial Number:	76176986	RXTRACK
Serial Number:	76081764	RXMAX
Serial Number:	74177915	RXCLAIM
Serial Number:	74335180	RXCLAIM
Serial Number:	74308616	RXSERVER
Serial Number:	73531173	RX EXPRESS

### **CORRESPONDENCE DATA**

**Fax Number**: 3129774405

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

via US Mail.

Phone: 3129774400

Email: ipdocket@uhlaw.com, bsugar@uhlaw.com

Correspondent Name: Bryan P. Sugar c/o Ungaretti & Harris

Address Line 1: 70 West Madison Street

Address Line 2: Suite 3500, Attn.: IP TM Docket
Address Line 4: Chicago, ILLINOIS 60602-4224

ATTORNEY DOCKET NUMBER:	1003452-0004
NAME OF SUBMITTER:	Bryan P. Sugar
Signature:	/Bryan P. Sugar/
	TRADEMARK

### 10/24/2013

### Total Attachments: 10

source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page1.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page2.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page3.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page5.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page6.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page6.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page8.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page8.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page9.tif source=1003452 Certificate of Formation TX and Conversion CERTIFIED copy 4-1-12#page9.tif



# Office of the Secretary of State

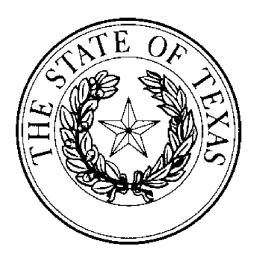
The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

Catamaran LLC Filing Number: 801694009

Certificate of Conversion

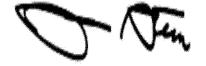
December 04, 2012

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 01, 2013.



Phone: (512) 463-5555

Prepared by: SOS-WEB



John Steen Secretary of State

REEL: 005138 FRAME: 0568

# Form 632 (Revised 05/11)

Return in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512 463-5709

Filing Fee: See instructions



# Certificate of Conversion of a Corporation Converting to a Limited Liability Company

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas

DEC 0 4 2012

**Corporations Section** 

The name of the converting corpo Catamaran Inc.	ration is:	
The jurisdiction of formation of the	e corporation is: Texas	
The date of formation of the corpo	oration is: January 25, 1995	
The file number, if any, issued to	the corporation by the secre	tary of state, is: 0134219900
Plan o	f Conversion—Alternative	e Statements
The corporation named above is collability company is:	onverting to a limited liabili	ty company. The name of the limited
Catamaran LLC		
The limited liability company will	be formed under the laws of	of: Texas
★ The plan of conversion is attached.	ched.	
	rsion is not attached, the following stoff conversion, the corporation	catements must be completed.  on certifies to the following statements:
A signed plan of conversion is on converting entity. The address of		
Street or Mailing Address	City	State Country Zip Code
		on at the principal place of business of ess of the principal place of business of
Street or Mailing Address	City	State Country Zip Code
A copy of the plan of conversion ventity before the conversion or by	vill be furnished on written the converted entity after th	request without cost by the converting   le conversion to any owner or member of

Form 632

**RECEIVED** 

Certificate of Formation for the Converted Entity
The converted entity is a Texas limited liability company. The certificate of formation of the Texas limited liability company is attached to this certificate either as an attachment or exhibit to the plan of conversion, or as an attachment or exhibit to this certificate of conversion if the plan has not been attached to the certificate of conversion.
Approvakoù Plia di Conversion
The plan of conversion has been approved as required by the laws of the jurisdiction of formation and the governing documents of the converting entity.
Effectiveness of filling (Select either A. B. or C.)
A.   This document becomes effective when the document is accepted and filed by the secretary of state.
B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is:
C. This document takes effect upon the occurrence of the future event or fact, other than the passage of time. The 90 <sup>th</sup> day after the date of signing is:
The following event or fact will cause the document to take effect in the manner described below:
Tax Certificate
Attached hereto is a certificate from the comptroller of public accounts that all taxes under title 2, Tax Code, have been paid by the corporation.
In lieu of providing the tax certificate, the limited liability company as the converted entity is liable for the payment of any franchise taxes.
Execution
The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.
Date: December 4, 2012
<u> </u>
Jeffrey Park, Chief Financial Officer, Executive Vice President, Finance and Tressurer
Signature and title of authorized person on behalf of the converting entity

Form 632

TX1518OC - 00/10/2011 C T System Online

1

### PLAN OF CONVERSION OF

CATAMARAN INC. (a Texas corporation)

#### INTO

# CATAMARAN LLC (a Texas limited liability company)

THIS PLAN OF CONVERSION dated as of December 4, 2012 (this "<u>Plan of Conversion</u>"), provides for the conversion (the "<u>Conversion</u>") of Catamaran Inc., a Texas corporation (the "<u>Pre-Conversion Entity</u>"), into Catamaran LLC, a Texas limited liability company (the "<u>Post-Conversion Entity</u>").

WHEREAS, each of the directors and the sole shareholder of the Pre-Conversion Entity deems it advisable and in the best interests of the Pre-Conversion Entity to convert the Pre-Conversion Entity into the Post-Conversion Entity pursuant to Section 10.101 of the Texas Business Organizations Code, as amended (the "Code"); and

WHEREAS, as a result of the Conversion, all of the shares of the Pre-Conversion Entity issued and outstanding will be converted into 100 percent of the membership interests in the Post-Conversion Entity.

NOW, THEREFORE, this Plan of Conversion provides as follows:

#### ARTICLE I

- 1.1 Conversion of the Pre-Conversion Entity into the Post-Conversion Entity. The Pre-Conversion Entity shall be converted into the Post-Conversion Entity in accordance with the applicable provisions of the laws of the State of Texas. The Pre-Conversion Entity shall continue its existence in the organizational form of the Post-Conversion Entity. The Post-Conversion Entity is to be a Texas limited liability company. The Conversion shall become effective upon the filing (the "Effective Time") of the certificate of conversion with respect to the Conversion and Certificate of Formation of the Post-Conversion Entity (attached hereto as Exhibit A) with the Secretary of State of the State of Texas. The name of the Post-Conversion Entity shall be "Catamaran LLC".
- 1.2 <u>Effect of Conversion</u>. The Conversion shall have the effect specified in the Code. Without limiting the generality of the foregoing, at the Effective Time, (i) the Post-Conversion Entity will be a limited liability company organized under the laws of the State of Texas, (ii) the sole shareholder of the Pre-Conversion Entity shall become the sole member of the Post-Conversion Entity, and (iii) all of the rights, duties and obligations of the Pre-Conversion Entity shall be vested in the Post-Conversion Entity.

### ARTICLE II

2.1 Officers. The officers of the Post-Conversion Entity shall continue in office until their successors shall have been elected and qualified.

2.2 <u>Directors</u>. The directors of the Post-Conversion Entity shall continue in office until their successors shall have been elected and qualified.

### ARTICLE III

3.1 <u>Conversion of Equity Interests.</u> At the Effective Time, each issued and outstanding share of common stock, par value \$1.00 per share, of the Pre-Conversion Entity shall be converted into and become one share of membership interest of the Post-Conversion Entity.

### ARTICLE IV

4.1 <u>Governing Law</u>. This Plan of Conversion shall be governed by the laws of the State of Texas.

\* \* \* \* \*

IN WITNESS WHEREOF, the undersigned has executed this Plan of Conversion as of the date first written above.

CATAMARAN HOLDINGS II, LLC

Name: Jeffrey Park
Title: Chief Financial Officer, Executive Vice President -

Finance, Secretary & Treasurer

Being the sole member of the Company.

Signature page to Catamaran Inc. Plan of Conversion

# EXHIBIT A

# CERTIFICATE OF FORMATION

See attached.

Form 205 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512 463-5709 Filing Fee: \$300 ificate of Formation

This space reserved for office use.

FILED In the Office of the Secretary of State of Texas

DEC 0 4 2012

**Corporations Section** 

# Certificate of Formation Limited Liability Company

Article 1 — Entity Name and Type  The filing entity being formed is a limited liability company. The name of the entity is:  Catamaran LLC  The name must contain the words "limited liability company," "limited company," or an abbreviation of one of these phrases.  Article 2 — Registered Agent and Registered Office (See instructions, Select and complete either A or B and complete C.)  A. The initial registered agent is an organization (cannot be entity named above) by the name of:  C. T. Corporation System  B. The initial registered agent is an individual resident of the state whose name is set forth below:  First Name  M.L. Lost Name  Suffix  C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900  Dallas  T.X. 75201-4234  Street Address  City  State Zip Code  Article 3—Governing Authority  (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON 1  NAME (There the name of either an individual or an organization, but not both.)  If INDIVIDUAL  Mark  Thierer  First Name  OR  IF ORGANIZATION  Organization Name  ADDRESS						
The name must contain the words "timited liability company," "timited company," or an abbreviation of one of these phrases.  Article 2 → Registered Agent and Registered Office (See instructions, Select and complete either A or B and complete C.)  A. The initial registered agent is an organization (cannot be entity named above) by the name of:  C.T. Corporation System  OR  B. The initial registered agent is an individual resident of the state whose name is set forth below:  First Name  M.I. Last Name  M.I. Last Name  Sulfix  C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900  Dallas  TX 75201-4234  Street Address  City  State  Zip Code  Article 3—Governing Authority (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON I  NAME (Enter the name of either an individual or an organization, but not both.)  If INDIVIDUAL  Mark  Thierer  First Name  M.I. Last Name  OR  IF ORGANIZATION  Organization Name  ADDRESS	Article 1 – Entity Name and Type					
The name must contain the words "limited liability company," "limited company," or an abbreviation of one of these phrases.  Article 2 — Registered Agent and Registered Office (See instructions. Select and complete either A or B and complete C.)  A. The initial registered agent is an organization (cannot be entity named above) by the name of:  C. T. Corporation System  OR  B. The initial registered agent is an individual resident of the state whose name is set forth below:  First Name  M.I. Last Name  Suffix  C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900  Dallas  T.X. 75201-4234  Street Address  City  State  Zip Code  Article 3—Governing Authority (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON 1  NAME (Enter the name of either an individual or an organization, but not both.)  If INDIVIDUAL  Mark  Thierer  First Name  M.I. Last Name  OR  IF ORGANIZATION  Organization Name  ADDRESS	The filing entity being formed is a	The filing entity being formed is a limited liability company. The name of the entity is:				
The name must contain the words "limited liability company," "limited company," or an abbreviation of one of these phrases.  Article 2 — Registered Agent and Registered Office (See instructions. Select and complete either A or B and complete C.)  A. The initial registered agent is an organization (cannot be entity named above) by the name of:  C. T. Corporation System  OR  B. The initial registered agent is an individual resident of the state whose name is set forth below:  First Name  M.I. Last Name  Suffix  C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900  Dallas  T.X. 75201-4234  Street Address  City  State  Zip Code  Article 3—Governing Authority (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON 1  NAME (Enter the name of either an individual or an organization, but not both.)  If INDIVIDUAL  Mark  Thierer  First Name  M.I. Last Name  OR  IF ORGANIZATION  Organization Name  ADDRESS	Catamaran LLC					
(See instructions. Select and complete either A or B and complete C.)  A. The initial registered agent is an organization (cannot be entity named above) by the name of:  C T Corporation System  OR  B. The initial registered agent is an individual resident of the state whose name is set forth below:  First Name  M.1. Last Name  Suffix  C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900  Dallas  TX 75201-4234  Street Address  City  State  Zip Code  Article 3—Governing Authority  (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON I  NAME (Enter the name of either an individual or an organization, but not both.)  IF INDIVIDUAL.  Mark  Thierer  First Name  OR  IF ORGANIZATION  Organization Name  ADDRESS		oility company," "	limited company," or an	abbreviation of c	one of these	phrases.
CT Corporation System  OR  B. The initial registered agent is an individual resident of the state whose name is set forth below:  First Name  M.I. Last Name  Suffix  C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900  Dallas  TX 75201-4234  Street Address  City  State  Article 3—Governing Authority  (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON 1  NAME (Enter the name of either an individual or an organization, but not both.)  If INDIVIDUAL  Mark  Thierer  First Name OR  IF ORGANIZATION  Organization Name  ADDRESS						
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B. The initial registered agent is an individual resident of the state whose name is set forth below:    First Name						
C. The business address of the registered agent and the registered office address is:  350 N. St. Paul Street Suite 2900 Dallas TX 75201-4234  Street Address City State Zip Code  Article 3—Governing Authority  (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON 1  NAME (Enter the name of either an individual or an organization, but not both.)  IF INDIVIDUAL  Mark Thierer  First Name M.I. Last Name Suffix  OR  IF ORGANIZATION		is an individu	ial resident of the s	state whose n	ame is so	et forth below:
Street Address  City  State  Article 3—Governing Authority (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON I  NAME (Enter the name of either an individual or an organization, but not both.)  IF INDIVIDUAL  Mark  Thierer  First Name OR  IF ORGANIZATION  Organization Name  ADDRESS	First Name	M.I.	Last Name			Suffix
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Street Address  City  State  Zip Code  Article 3—Governing Authority (Select and complete either A or B and provide the name and address of each governing person.)  A. The limited liability company will have managers. The name and address of each initial manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON I  NAMIE (Enter the name of either an individual or an organization, but not both.) IF INDIVIDUAL  Mark  Thierer  First Name OR IF ORGANIZATION  Organization Name  ADDRESS	350 N. St. Paul Street Suite 2900	Dallas		ТХ	75201	-4234
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manager are set forth below.  B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.  GOVERNING PERSON 1  NAME (Enter the name of either an individual or an organization, but not both.)  IF INDIVIDUAL  Mark  Thicrer  First Name OR IF ORGANIZATION  Organization Name  ADDRESS						
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NAME (Enter the name of either an individual or an organization, but not both.)  IF INDIVIDUAL  Mark  Thierer  First Name OR IF ORGANIZATION  Organization Name  ADDRESS						
NAME (Enter the name of either an individual or an organization, but not both.)  IF INDIVIDUAL  Mark  Thierer  First Name OR IF ORGANIZATION  Organization Name  ADDRESS	GOVERNING PERSON 1					
First Name M.I. Last Name Suffix OR 1F ORGANIZATION  Organization Name ADDRESS	NAME (Enter the name of either an individual or a	in organization, but r	ot both.)			· · · · · · · · · · · · · · · · · · ·
OR 1F ORGANIZATION  Organization Name ADDRESS	Mark		Thicrer			
Organization Name ADDRESS		M.I.	Last Name			Suffix
Organization Name ADDRESS						
ADDRESS	IF ORGANIZATION					
2441 Werranville Bood Suite 610 Liels II JUSA (0522-2642						
2441 Warrenville Road, Suite 610 Lisle IL USA 60532-3642	2441 Warrenville Road, Suite 610	Lis	sle	IL	USA	60532-3642
Street or Mailing Address City State Country Zip Code	Street or Mailing Address	Cit	ν	State	Country	Zip Code

Form 205

4

NAME (Enter the name of either an individual or	an organization, bu	t not both.)			
IF INDIVIDUAL					
Jeffrey		Park			
First Name	M.I.	Last Name			Suffix
OR					
IF ORGANIZATION					
Organization Name					
2441 Warrenville Road, Suite 610	L	isle	IL	USA	60532-3642
Street or Mailing Address	C	ity	State	Country	Zip Code
NAME (Enter the name of either an individual or IF INDIVIDUAL Clifford	an organization, bu				
First Name	M.I.	Berman Last Name			Suffix
OR	N1,1,	Lasi Name			зидих
IF ORGANIZATION					
Organization Name					
ADDRESS					
2441 Warrenville Road, Suite 610	Li	isle	1L	USA	60532-3642
Street or Mailing Address	С	ity	State	Country	Zip Code

# Article 4 – Purpose

The purpose for which the company is formed is for the transaction of any and all lawful purposes for which a limited liability company may be organized under the Texas Business Organizations Code.

### Supplemental Provisions/Information

Text Area: [The attached addendum, if any, is incorporated herein by reference.]
The company is being formed pursuant to a plan of conversion. The converting entity in the plan of conversion is Catamaran Inc., a corporation incorporated under the laws of the State of Texas on January 25, 1995, with a registered office address in the State of Texas located at c/o CT Corporation System, 350 N. St. Paul Street, Suite 2900, Dallas, TX 75201-4234.

Form 205

### Organizer

The name and address of the organizer:		
Jeffrey Park		
Name		
2441 Warrenville Road, Suite 610	Lisle	JL 60532-3642
Street or Mailing Address	City	State Zip Code
Effective	ness of Filing (Select either A. B., or C	<b>:</b> ,
A. This document becomes effective	when the document is filed by	the secretary of state.
B. This document becomes effective	at a later date, which is not mo	re than ninety (90) days from
the date of signing. The delayed effecti		
C. This document takes effect upon		nt or fact, other than the
passage of time. The 90th day after the		
The following event or fact will cause t		manner described below:
in the Marian No martine specific in a	Execution	
The undersigned affirms that the pe appointment. The undersigned signs it submission of a materially false or fraud undersigned is authorized to execute the	nis document subject to the per Julent instrument and certifies u	nalties imposed by law for the
Date: December 4, 2012		
	-D	
	Signature of organizer	
	Joffrey Park	
	Printed or typed name of organia	¥ť

Porm 205

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TRINGSHE : INSCREEN IN TRANSMITTAN

**RECORDED: 10/24/2013**