

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM381853

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	ENTITY CONVERSION
RESUBMIT DOCUMENT ID:	900361460

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
AMERICAREERS, LLC		04/25/2016	Limited Liability Company: MICHIGAN

RECEIVING PARTY DATA

Name:	AMERICAREERS, LLC
Street Address:	9951 ATLANTIC BLVD., STE 175
City:	Jacksonville
State/Country:	FLORIDA
Postal Code:	32225
Entity Type:	Limited Liability Company: FLORIDA

PROPERTY NUMBERS Total: 18

Property Type	Number	Word Mark
Registration Number:	3907493	U UNIVERSITYJOBS.COM
Registration Number:	4334525	COURSEPEDIA
Registration Number:	4170029	OPEN HIGHER ED
Registration Number:	3984238	COURSEPEDIA
Registration Number:	4412431	SCIENCEJOBS.ORG
Registration Number:	4449876	UNIVERSITYJOBS.COM
Registration Number:	4237790	SOCIALHR.COM
Registration Number:	4233576	UTEMPS.COM
Registration Number:	4135507	AC AMERICAREERS
Registration Number:	4135104	UNITEDHIRE
Registration Number:	4138187	AMERICAREERS
Registration Number:	3970697	AMERICAREERS
Registration Number:	4020836	SCIENCEJOBS.ORG
Registration Number:	3708415	HIGHEREDSPACE
Registration Number:	3890799	ACADEMIC SPACE
Registration Number:	3666461	HIGHER ED SPACE
Registration Number:	3669347	AMERICAREERS
Registration Number:	4939903	POSTDOCJOBS.COM

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CORRESPONDENCE DATA**Fax Number:** 9042121238*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.***Phone:** 8887678362**Email:** danmark20108@gmail.com**Correspondent Name:** Da Ouyang**Address Line 1:** 9951 ATLANTIC BLVD., STE 175**Address Line 4:** Jacksonville, FLORIDA 32225

NAME OF SUBMITTER:	Da Ouyang
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SIGNATURE:	/D.O./
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DATE SIGNED:	04/25/2016
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Total Attachments: 6

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State of Florida

Department of State

I certify from the records of this office that AMERICAREERS, LLC is a limited liability company organized under the laws of the State of Florida, filed on September 25, 2015, effective April 19, 2000.

The document number of this limited liability company is L15000166766.

I further certify that said limited liability company has paid all fees due this office through December 31, 2016 and that its status is active.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Twenty-fifth day of April, 2016*



Ken Detjmer
Secretary of State

Tracking Number: CU5829997169

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

TRADEMARK

REEL: 005776 FRAME: 0243

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Conversion, and Articles of Organization, filed on September 25, 2015, with an organizational date deemed effective April 19, 2000, for AMERICAREERS, LLC, the resulting Florida Limited Liability Company, as shown by the records of this office.

The document number of this entity is L15000166766.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
First day of October, 2015



CR2EO22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

FILED
2015 SEP 25 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Conversion **and attached Articles of Organization** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Liability Company** in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
AMERICAREERS, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability company
(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of MICHIGAN
on APRIL 19, 2000
(date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
AMERICAREERS, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 18th day of September 20 15.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: DA OUYANG Title: PRINCIPAL / MANAGER / member

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: [Signature]
Printed Name: DA OUYANG Title: PRINCIPAL / MEMBER

Signature: [Signature]
Printed Name: Sumei Wei Title: member

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

- Articles of Conversion: \$25.00
- Fees for Florida Articles of Organization: \$125.00
- Certified Copy: \$30.00 (Optional)
- Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERICAREERS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

FILED
2015 SEP 25 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

9951 ATLANTIC BLVD., SUITE 175
JACKSONVILLE, FL 32225

9951 ATLANTIC BLVD., SUITE 175
JACKSONVILLE, FL 32225

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

DA OUYANG

Name

9951 ATLANTIC BLVD., SUITE 175

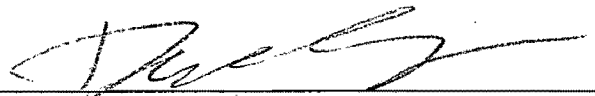
Florida street address (P.O. Box **NOT** acceptable)

JACKSONVILLE FL 32225

City

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR / AMBR

Name and Address:

DA OUYANG

9951 ATLANTIC BLVD., SUITE 175

JACKSONVILLE, FL 32225

(Use attachment if necessary)

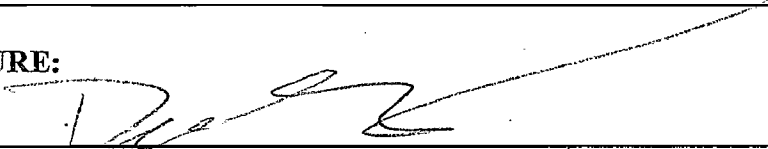
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

DA OUYANG

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)