TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM474597

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT OF THE ENTIRE INTEREST AND THE GOODWILL
SEQUENCE:	1

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
SPHINX SECURITY INC.	FORMERLY SPHINX	01/03/2018	Corporation: PENNSYLVANIA

RECEIVING PARTY DATA

Name:	Amy Hunt
Doing Business As:	SPHINX SECURITY
Street Address:	194 Helens Drive
City:	Greencastle
State/Country:	PENNSYLVANIA
Postal Code:	17225
Entity Type:	INDIVIDUAL: UNITED STATES

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Serial Number:	77115842	SPHINX

CORRESPONDENCE DATA

Fax Number:

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: 2403156253

Email: support@sphinxwateralarm.com

Correspondent Name: Amy hunt

Address Line 1: 194 Helens Drive

Address Line 4: Greencastle, PENNSYLVANIA 17225

NAME OF SUBMITTER:	Amy Anne Hunt
SIGNATURE:	/Amy Anne Hunt/
DATE SIGNED:	05/18/2018

Total Attachments: 10

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Department of the Treasury Internal Revenue Service Ogden UT 84201-0038

Natice CP261 Notice date April 2, 2018 Employer ID number 82-3861141 To contact us Phone 1-800-829-0115

Page 1 of 3

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160860

194 HELENS DR GREENCASTLE PA 17225-8773

We've accepted your S Corporation election

You will be treated as an S Corporation starting January 2, 2018

We've accepted your S Corporation election. As a result, your tax year will end in December, and you will be treated as an 5 Corporation starting January 2, 2018.

What you need to do

You don't need to take any action.

Review this notice to understand some of your obligations and responsibilities as an S Corporation.

Continued on back...



SPHIMX WAMY RUNE 194 HS15NS DR GREENCASTLE FA 17225-8773

CP261 Notice Notice date April 2, 2018 Employer ID number 82-3861141

Contact information

If your address has changed, please call 1-800-829-0115 or visit www.irs.gov. ☐ Please check here if you've included any correspondence. Write your Employer ID number (82-3861141) on any correspondence.

∃a.m. Primary Phone

INTERNAL REVENUE SERVICE OGDEN UT 84201-0038

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			Natice Notice Employ Page 3	er ID number	CP261 April 2, 2018 82-3861141	
Additional information	 For moinstruc For tax 1-800 Keep ti 	tions, forms, instruc TAX-FORM (1- his notice for y	see Form(s) 11205, 25 tions, and publications, 800-829-3676). our records.	visit www.irs.ge		
	it you nee	ed assistance, p	lease don't hesitate to	contact us.		

SPHINX % AMY HUNT 194 HELENS DR GREENCASTLE, PA 17225 Date of this notice: 01-03-2018

Employer Identification Number: 82-3861141

Form: SS-4

Number of this notice: CP 575 A

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS MOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 82-3861141. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1120

04/15/2019

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, Election by a Small Business Corporation.

SPHINX % AMY HUNT 194 HELENS DR

GREENCASTLE, PA 17225

Date of this notice: 01-03-2018

Employer Identification Number: 82-3861141

Form: SS-4

Number of this notice: CP 575 A

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1/4/2018

P: 13 T:26 10016150 PP1B-000005548 SPHINX % AMY HUNT 194 HELENS DR GREENCASTLE PA 17225-8773

TIN/EIN

(Taxpayer Identification Number/Employee Identification Number)

-*1141

PIN

(EFTPS Personal Identification Number)

6436

Dear Sphinx,

As a new business with a likely federal tax deposit obligation, you were enrolled in the Electronic Federal Tax Payment System (EFTPS), a free service of the U.S. Department of the Treasury.

To start making payments via EFTPS, follow these steps:

- Call 1.800.555.3453. Enter your EIN and the four-digit PIN that appears in the box above.
 If you're calling from outside the U.S., please call 1.303.967.5916.
- Enter your financial institution information, including account number, bank routing number, and account type (savings or checking) when instructed. The voice response system will repeat the number you entered so you can either confirm or correct the number.
- 3. Re-enter your PIN.
- 4. Enter the phone number of the person to contact if we have questions about your EFTPS enrollment. This could be you or a member of your staff.
- Record the enrollment number and keep for future reference.

After you've completed your enrollment, you can make payments at **EFTPS.gov** or via the phone by following the steps listed on reverse side of this letter.

Please note: While you can schedule a payment as soon as you activate your enrollment, payments must be scheduled by 8 p.m. ET the day before the due date to be timely. The funds will move out of your bank account on the payment settlement date you select. Payments can be scheduled up to 365 days in advance.

If a payroll company, accountant, or other third party makes any federal tax payments for you, be sure to review this information with that entity.

If you need further assistance, please call customer service 24 hours a day, 7 days a week at 1.800.555.4477. If you are calling from outside the U.S., call 1.303.967.5916.



PP1 11-13

DSCB: 54-311-2

- 6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.
- 7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

Charles B Hunt Jr, John Lemke

lame to be executed this	the undersigned has caused this Application for Registration of Fictitious
th day of January .	2018
Amy Hunt	
Individual Signature	

DSCB: 54-311-2

- 6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.
- 7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

Charles B Hunt Jr, John Lemke

IN TESTIMONY WHEREOF, the under Name to be executed this 8th day of January , 2018	rsigned has caused this Application for Registration of Fictitious
our day or containly a serve	
Amy Hunt	
Individual Signature	

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understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.	
7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are): Charles B Hunt Jr, John Lemke	s
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Name to be executed this 8th day of January , 2018 .	
Amy Hunt	
Individual Signature	
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에 발매하였다. 사용, 사용, 전에 발매하였다. 하고 하고 있다. 그는 그는 그는 그는 그를 가장하고 하는 것이 말로 가장하였다. 그는 학생하였다. 일본 사용, 상태, 사용, 사용, 보고 있는 것이 하는 것이 되었다. 하고 있는 것이 되었다는 것이 모든 사용,	
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마이마양왕왕왕왕의 발생도 그는 그는 그는 이번 이번 이번 생각하는 발생왕의 사고 바다 전기와 왕을 모시다. 그렇지 나는 사람들왕왕의 발생도 그는 그는 그는 그는 이번 이번 생각왕이는 발생왕의 사고 나는 그것 같아.	

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to: nv Hunt			on of Fictitious Name
me			DSCB:54-311 (rev.2/2017)
Helens Drive,)	
reencastle PA	17225	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
y State Return document by email to			311
Read all instructions prior	to completing. This form may be sul	omitted online at https://	www.corporations.pa.gov/.
e: \$70.00	☐ I qualify for a veteran/reservist-owne	d small business fee exempti	on (see instructions)
ompliance with the require	ements of 54 Pa.C.S. § 311 (relating to	registration), the under	signed entity(ies) desiring to
	r 54 Pa.C.S. Ch. 3 (relating to fictition		
1. The fictitious name is			
SPHINX SECURITY			
	he character or nature of the business	or other activity to be c	arried on under or
through the fictitious		21 22 1 1 1 1	Ţ
Spainx Security Dusii	ness will be selling its products across	ine omne market, inrou	gn various avenues.
3. The address, includin	g number and street, if any, of the pri	ncipal place of business	(P.O. Box alone is not
acceptable):			
194 Helen's Drive,	Greencastle	PA 17225	Franklin
Number and street	(1)	State Zip	County
4. The name and addres	ss, including number and street, if any	, of each individual inter	ested in the business is:
Name	Number and Street	City	State Zîp
Amy Hunt	194 Helen's Drive . G	reencastle , PA , United	
5. Each entity, other tha	n an individual, interested in such bu	siness is (are):	
Name		Form of Organization	Organizing Jurisdiction
iname		rothrorotgamzanon	Organizing Juristiction
Principal Office Address			
	v		
PA Registered Office, if an	y		

Entity# : 6663498 Oate Filed : 02/01/2018 Robert Torres Acting Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

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isme		
Legalzoom-eem-inc c/o Penncorp Servicegroup, Inc. 63570 isy Counter PICK Ulfate Zip Code] Return document by email to:		202JD1549
Read all instructions prior to completing. This form may b	submitted online at https://	www.corporations.ps.gov
e: \$125 🔲 I qualify for a veteran/reservis		
eck only one: Dusiness-stock (§ 1306) Dusiness-nonstock (§ 2102)	Management (§ 2703) Professional (§ 2903) Insurance (§ 3101)	☐ Benefit (§ 3303) ☐ Cooperative (§ 710
ociations), the undersigned, desiring to incorporate a corpor	ation for profit, hereby states	that:
2. Complete part (a) or (b) - not both:		
(a) The address of this corporation's proposed registered (post office box alone is not acceptable)	office in this Commonweal	th is:
(post office box alone is not acceptable)		
(post office box alone is not acceptable) Number and Street City	State Zip	County
(post office box alone is not acceptable)	State Zip	County
(post office box alone is not acceptable) Number and Street City (b) The name of this corporation's commercial registere c/o: United States Corporation Agents, Inc., County of Left	State Zip d office provider and the co	County
(post office box alone is not acceptable) Number and Street City (b) The name of this corporation's commercial registere	State Zip d office provider and the co	County
(post office box alone is not acceptable) Number and Street City (b) The name of this corporation's commercial registere c/o: United States Corporation Agents, Inc., County of Left	State Zip d office provider and the cou digh	County unty of venue is: County

2019 FEB - 1 AM 10: 00 PA DEPT OF STATE

TRADEMARK REEL: 006377 FRAME: 0743

RECORDED: 05/18/2018