

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM635459

|   |                                    |                       |                                       |
|---|------------------------------------|-----------------------|---------------------------------------|
| <b>SUBMISSION TYPE:</b>   | NEW ASSIGNMENT                     |                       |                                       |
| <b>NATURE OF CONVEYANCE:</b>  | CHANGE OF NAME                     |                       |                                       |
| <b>CONVEYING PARTY DATA</b>   |                                    |                       |                                       |
| <b>Name</b>   | <b>Formerly</b>                    | <b>Execution Date</b> | <b>Entity Type</b>                    |
| Forge Cannabinoids, LLC   |                                    | 11/07/2020            | Limited Liability Company:<br>FLORIDA |
| <b>RECEIVING PARTY DATA</b>   |                                    |                       |                                       |
| <b>Name:</b>  | Folsom & Forge, LLC                |                       |                                       |
| <b>Street Address:</b>  | 5249 L B McLeod Blvd.              |                       |                                       |
| <b>City:</b>  | Orlando                            |                       |                                       |
| <b>State/Country:</b>   | FLORIDA                            |                       |                                       |
| <b>Postal Code:</b>   | 32811                              |                       |                                       |
| <b>Entity Type:</b>   | Limited Liability Company: FLORIDA |                       |                                       |
| <b>PROPERTY NUMBERS Total: 1</b>  |                                    |                       |                                       |
| <b>Property Type</b>  | <b>Number</b>                      | <b>Word Mark</b>      |                                       |
| <b>Serial Number:</b>   | 90306428                           | FORGE                 |                                       |
| <b>CORRESPONDENCE DATA</b>  |                                    |                       |                                       |
| <b>Fax Number:</b>  | 3054166887                         |                       |                                       |
| <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> |                                    |                       |                                       |
| <b>Phone:</b>   | 305-416-6880                       |                       |                                       |
| <b>Email:</b>   | miatm@gray-robinson.com            |                       |                                       |
| <b>Correspondent Name:</b>  | Jorge Espinosa                     |                       |                                       |
| <b>Address Line 1:</b>  | 333 SE 2nd Avenue, Suite 3200      |                       |                                       |
| <b>Address Line 4:</b>  | Miami, FLORIDA 33131               |                       |                                       |
| <b>ATTORNEY DOCKET NUMBER:</b>  | FOLSOM AND FORGE                   |                       |                                       |
| <b>NAME OF SUBMITTER:</b>   | Jorge Espinosa                     |                       |                                       |
| <b>SIGNATURE:</b>   | /Jorge Espinosa/                   |                       |                                       |
| <b>DATE SIGNED:</b>   | 03/30/2021                         |                       |                                       |
| <b>Total Attachments: 4</b>   |                                    |                       |                                       |
| source=68324-2 Folsom Forge - Amended articles re Name Change stamped#page1.tif   |                                    |                       |                                       |
| source=68324-2 Folsom Forge - Amended articles re Name Change stamped#page2.tif   |                                    |                       |                                       |
| source=68324-2 Folsom Forge - Amended articles re Name Change stamped#page3.tif   |                                    |                       |                                       |
| source=68324-2 Folsom Forge - Amended articles re Name Change stamped#page4.tif   |                                    |                       |                                       |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FORGE CANNABINOIDS LLC

(Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company))

The Articles of Organization for this Limited Liability Company were filed on 04.20.2020 and assigned Florida document number L20000107777

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FOLSOM & FORGE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5249 L B McLeod Blvd. Orlando, FL 32811

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7320 SW 121st Street Pinecrest, FL 33156

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H20000411924 3)))

MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u>           |
|--------------|-------------|----------------|---------------------------------|
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
| _____        | _____       | _____          | <input type="checkbox"/> Remove |
| _____        | _____       | _____          | <input type="checkbox"/> Change |
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
| _____        | _____       | _____          | <input type="checkbox"/> Remove |
| _____        | _____       | _____          | <input type="checkbox"/> Change |
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
| _____        | _____       | _____          | <input type="checkbox"/> Remove |
| _____        | _____       | _____          | <input type="checkbox"/> Change |
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
| _____        | _____       | _____          | <input type="checkbox"/> Remove |
| _____        | _____       | _____          | <input type="checkbox"/> Change |
| _____        | _____       | _____          | <input type="checkbox"/> Add    |
| _____        | _____       | _____          | <input type="checkbox"/> Remove |

