CH \$65.00 54575

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 ETAS ID: TM651899

Stylesheet Version v1.2

SUBMISSION TYPE:NEW ASSIGNMENTNATURE OF CONVEYANCE:RELEASE OF SECURITY INTEREST

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
FIRST MIDWEST BANK, AS ADMINISTRATIVE AGENT		11/06/2020	BANKING CORPORATION: ILLINOIS

RECEIVING PARTY DATA

Name:	BENEFIT MOBILE, INC.
Street Address:	300 Millennium Drive
City:	Crystal Lake
State/Country:	ILLINOIS
Postal Code:	60012
Entity Type:	Corporation: DELAWARE

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark	
Registration Number:	5457580	BENEFIT	
Registration Number:	5457581	RAISE FUNDS WITHOUT FUNDRAISING	

CORRESPONDENCE DATA

Fax Number: 916.930.79

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: 916.930.3263

Email: TMDocket@us.dlapiper.com

Correspondent Name: Carissa Bouwer, Esq.

Address Line 1: 555 Mission Street, Suite 2400

Address Line 2: DLA Piper LLP (US)

Address Line 4: San Francisco, CALIFORNIA 94105-2933

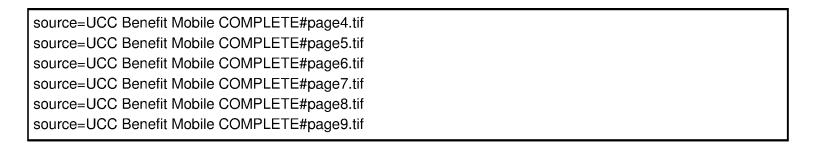
NAME OF SUBMITTER:	Carissa Bouwer, Esq. of DLA Piper LLP
SIGNATURE:	/Carissa Bouwer/
DATE SIGNED:	06/04/2021

Total Attachments: 9

source=UCC Benefit Mobile COMPLETE#page1.tif source=UCC Benefit Mobile COMPLETE#page2.tif source=UCC Benefit Mobile COMPLETE#page3.tif

TRADEMARK REEL: 007316 FRAME: 0810

900621681



TRADEMARK REEL: 007316 FRAME: 0811

CC FINANCING STATEMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) LIEN SOLUTIONS 800-331-3282 B. E-MAIL CONTACT AT FILER (optional) UCCFILINGRETURNSWOLTERSKLUWER.COM C. SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. BOX 29071 GLENDALE, CA 91209-9071			U.C.C.	laware Department of S U.C.C. Filing Section fled: 09:52 AM 11/15/20 Initial Filing No: 2018 ce Request No: 201876	918 7913417
1. DEBTOR'S NAME: Provide only gag Debtor name (1a on 1b) (a name will not fit in line 1b, seave all of item 1 blank, check here 1a. ORGANIZATION'S NAME RENEFIT MOBILE, INC.	ise exact, full name; do not omit, and provide the Individual Cebto	nodity, or abbreviate any part of	the Debto		ndividual Debtor's
OR 15, INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10 MAILING ADDRESS 300 MILLENNIUM DRIVE	CHY CRYSTAL LAR	······	STATE	POSTAL CODE 60012	COUNTRY
28 ORGANIZATION'S NAME 20 INDIVIDUAL'S SURNAME 20 MAILING ADDRESS	FIRST PERSONA CITY	L NAME	ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASS	IGNOR SECURED PARTY). Pro	zide only <u>one</u> Secured Party nem	a (3a or 3)		
FIRST MIDWEST BANK, AS ADMINISTRATIVE AGENT					
OR 3b INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITIO	inal name(s)/initial(s)	SUFFIX
3c MAGLING ADDRESS 8750 WEST BRYN MAWR AVE., STE 1300	CELA		STATE IL	POSTAL CODE 60631	COUNTRY US
4. COLLATERAL: This financing statement covers the following collinal assets of the Debtor, wherever loarising, together with all proceeds t		w owned or existi	og or	hereafter acqu	ired or

5. Check only if applicable and check only one box 6
6a. Check only if applicable and check only one box តិb. Check ល្អស្រ្ត applicable and check only one box Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Non-UCC Filing Agricultural Lien. 7. ALTERNATIVE DESIGNATION (if applicable): Seller/Buyer Bailee/Bailor Licensee/Licensor Lessee/Lessor Consignee/Consignor 8. OPTIONAL FILER REFERENCE DATA:

DE-0-67359115-56149686

International AssTRADEMARKial Administratos

REEL: 007316 FRAME: 0812



KAY KIM McDermott Will & Emery LLP 2049 Century Park East **Suite 3800** Los Angeles, CA 90067-3208

Date: 11/13/2020 Order #: 77624310 Customer #: 507197 Reference 1: 106098.0010

Reference 2: --

Target Name: 20187913417

Jurisdiction: Secretary of State, Delaware

Filing Type: Termination Filing

Searched Through: --See attached filing acknowledgement

Document Listing:

Results:

File #	File Date	Type of Filing
2020 7862842	11/10/2020	Termination

SEAN MOORE Service Solutions Team 2 555 Capitol Mall Ste 1150 Sacramento, CA 95814 8008748820 sean.moore@wolterskluwer.com This report contains information compiled from sources which CT Corporation considers reliable but does not control. The information provided is not a certified record of the applicable jurisdiction unless otherwise indicated. CT Corporation does not (i) warrant or guarantee the accuracy, completion or timeliness of the information provided or (ii) accept any liability for delays, errors or omissions in the information provided. CT Corporation is not an insurer with regard to this information or these services. Under no circumstances shall CT Corporation be liable for any loss of underlying collateral or loss (or decreased priority) of security interest in connection with this information or these services. Any categorization of search results is provided for convenience only and is not to be construed as a legal opinion concerning the status of filings.

	CC FINANCING STATEMENT AMENDME! LOWINSTRUCTIONS		100 00		
A. I	NAME & PHONE OF CONTACT AT FILER (optional)				
B. E	E-MAIL CONTACT AT FILER (optional)			Delaware Department of U.C.C. Filing Section Filed: 05:19 PM 11/10/2	II.
C. S	SEND ACKNOWLEDGMENT TO: (Name and Address)	<u> </u>		U.C.C. Initial Filing No: 2013	
Ī		1		Amendment No: 2020 78 Service Request No: 2020	
				were and a second of the	and the state of the state of
1		1	No. 1		•
				SPACE IS FOR FILING OFFICE US	
	INITIAL FINANCING STATEMENT FILE NUMBER 1187913417 11/15/18		(or recorded) in the F	ATEMENT AMENDMENT is to be filed [f REAL ESTATE RECORDS It Addendum (Form UCC3Ad) <u>and</u> provide De	
2.	TERMINATION: Effectiveness of the Financing Statement identified at Statement	ove is terminated			
3.[ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affected			me of Assignor in item 9	*
4. [CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respec	of to the security interest(s) of	Secured Party authorizing this Continua	ation Statement is
5.	PARTY INFORMATION CHANGE:				
	CH	one of these three t ANGE name and/or	address: CompleteADI	name: Complete item DELETE namer 75, and item 7c	e; Give record name in item 6a or 6b
6. C	CURRENT RECORD INFORMATION: Complete for Party Information Ch			a 70, and fell 70.	in teni da di do
oR	6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
			7		military
	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Party Information (Party Information)	halion Change - provide	only <u>one</u> name (7a or 7b) (use exact.	full name, do not omit, modify, or abbreviate any pa	rt of the Debtor's name)
OR					
	75 INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S FIRST PERSONAL NAME		eastinuminatuupyihijase-a ^{htii} iiiiiiiineeseayatinassida	destinational distribution distribution de la constitución de la const	
	ANDIVIDUAL IC ANDITIONAL MANUSCRIPTALIS				Learne
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. 1	MAILING ADDRESS	СПУ		STATE POSTAL CODE	COUNTRY
8. [COLLATERAL CHANGE: Also check one of these four boxes:	DD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
	Indicate collateral:				
			a*		
	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	AMENDMENT:	Provide only <u>one</u> name (9a or t	(hame of Assignor, if this is an Assign	ment)
	this is an Amendment authorized by a DEBTOR, check here and provid [9a_ORGANIZATION'S NAME	e name of authoriz	ing Debtor	virinni territori de la comunicación de la comunica	
- 1	The property of the control of the c				
	First Midwest Bank, as Administrative A	gent			
	First Midwest Bank, as Administrative Ag	gent FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

International AssociTRAIDEMARK ministrators (IACA)
FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 007316 FRAME: 0814



KAY KIM McDermott Will & Emery LLP 2049 Century Park East Suite 3800 Los Angeles, CA 90067-3208 Date: 11/13/2020 Order #: 77624310 Customer #: 507197 Reference 1: 106098.0010

Reference 2: --

Target Name: 20184997363

Jurisdiction: Secretary of State, Delaware

Filing Type: Termination Filing

mination Filing Searched Through: --

Results: See attached filing acknowledgement

Document Listing:

File #	File Date	Type of Filing
2020 7862909	11/10/2020	Termination

SEAN MOORE Service Solutions Team 2 555 Capitol Mall Ste 1150 Sacramento, CA 95814 8008748820 sean.moore@wolterskluwer.com This report contains information compiled from sources which CT Corporation considers reliable but does not control. The information provided is not a certified record of the applicable jurisdiction unless otherwise indicated. CT Corporation does not (i) warrant or guarantee the accuracy, completion or timeliness of the information provided or (ii) accept any liability for delays, errors or omissions in the information provided. CT Corporation is not an insurer with regard to this information or these services. Under no circumstances shall CT Corporation be liable for any loss of underlying collateral or loss (or decreased priority) of security interest in connection with this information or these services. Any categorization of search results is provided for convenience only and is not to be construed as a legal opinion concerning the status of filings .

UCC FINANCING STATEMENT AMEN	DMENT			
A. NAME & PHONE OF CONTACT AT FILER (optional)				
B. E-MAIL CONTACT AT FILER (optional)			Delaware Departmen U.C.C. Filing Se	ction
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			Filed: 05:21 PM 11/ U.C.C. Initial Filing No:	2018 4997363
			Amendment No: 2020 Service Request No: 2	
		100 A	OF IO FOR FILMIO OFFICE	108.000
1a. INITIAL FINANCING STATEMENT FILE NUMBER		b. This FINANCING STATES	CE IS FOR FILING OFFICE MENT AMENDMENT is to be fit	
20184997363 07/20/18		(or recorded) in the REAL Filer: attach Amendment Add	ESTATE RECORDS lendum (Form UCC3Ad) <u>and</u> provid	le Debtor's name in item 13
 TERMINATION: Effectiveness of the Financing Statement is Statement. 	dentified above is terminated w	ith respect to the security interes	ut(s) of Secured Party authoriza	ng this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 and also indices.			f Assignor in item 9	*
CONTINUATION: Effectiveness of the Financing Statemer continued for the additional period provided by applicable law		to the security interest(s) of Sec	ured Party authorizing this Con	tinuation Statement is
5. PARTY INFORMATION CHANGE:				
Check <u>orie</u> of these two boxes.	ND Check one of these three bo CHANGE name and/or a	ddress: CompleteADD nan	ne: Complete itemDELETE	name: Give record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Inf	jitem 6a or 6b; <u>and</u> item 7 ormation Change - provide only c		and item 7cto be dele	eted in item 6a or 6b
6a. ORGANIZATION'S NAME		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ikan kecaman di sempang keman di dalah di di semanan sebagai kemaja kemaja kemaja kemaja kemaja kemaja kemaja k	
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIA	L(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment	tos Dighis satarmation Change armonia	niu nno mamo 174 de 750 filmo swant full no	mor do not post modific as abbassista a	no need of the Politoria roman
7a. ORGANIZATION'S NAME	t on a strik amortisonan britanike - kreatise o	THE MANY COURSE ASSESSMENT AND THE PROPERTY OF	ing of the state modify at sometime of	th have on the Contra Street (c)
OR 75 INDIVIDUAL'S SURNAME	a ja a ja ta kandaniska kanda da ta ta		territoria de la companya de la comp	estado de la companya
IN MOUNTAINE SOUTHWINE				
INDIVIDUAL'S FIRST PERSONAL NAME	maninimatinggilinasikaninggilininasikuninggilinas	iidiiisiaasiigaidijaiigadamistani	demonstration of the second	nga ayan kata ayan kata da kata kata ayan da a
			: ::::::::::::::::::::::::::::::::::::	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four box	es. ADD collateral	DELETE collateral F	ESTATE covered collateral	ASSIGN collateral
Indicate collateral:	L. L		A CONTRACTOR OF THE CONTRACTOR	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZ	THE THE SMESHBALLS, A	A Six of		
If this is an Amendment authorized by a DEBTOR, check here	and provide name of authorizin		ame or Assignor, It are is an As	siginnean)
9a ORGANIZATION'S NAME First Midwest Bank, as Administra	tiva Agant		All I I I I I I I I I I I I I I I I I I	
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIA	L(S) SUFFIX
				oming of the control
10, OPTIONAL FILER REFERENCE DATA: DE SOS - #106098.0010	The state of the s	- 1944 (F.C.) - Magnetin Antonio (
many the total of the text of				

International AssociTRADEMARKIMINIStrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 007316 FRAME: 0816



KAY KIM McDermott Will & Emery LLP 2049 Century Park East Suite 3800 Los Angeles, CA 90067-3208 Date: 11/13/2020 Order #: 77624310 Customer #: 507197 Reference 1: 106098.0010

Reference 2: --

Target Name: 20184997421

Jurisdiction: Secretary of State, Delaware

Filing Type: Termination Filing

Searched Through: --

Results: See attached filing acknowledgement

Document Listing:

File #	File Date	Type of Filing
2020 7862966	11/10/2020	Termination

SEAN MOORE Service Solutions Team 2 555 Capitol Mall Ste 1150 Sacramento, CA 95814 8008748820 sean.moore@wolterskluwer.com This report contains information compiled from sources which CT Corporation considers reliable but does not control. The information provided is not a certified record of the applicable jurisdiction unless otherwise indicated. CT Corporation does not (i) warrant or guarantee the accuracy, completion or timeliness of the information provided or (ii) accept any liability for delays, errors or omissions in the information provided. CT Corporation is not an insurer with regard to this information or these services. Under no circumstances shall CT Corporation be liable for any loss of underlying collateral or loss (or decreased priority) of security interest in connection with this information or these services. Any categorization of search results is provided for convenience only and is not to be construed as a legal opinion concerning the status of filings .

A NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO. (Name and Address) C. SEND ACKNOWLEDGMENT TO. (Name and Address) Delaware Department of State U.C.C. Filling Section Filed: 65:23 FM 11/10/2020 U.C.C. Initial Filling No: 2018 9997421 Amendment No: 2020 7863966 Service Request No: 26208331300 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FIRANCING STATEMENT FILE NUMBER 2018 4997421 07/20/18 1b. This FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/2020 2018 4997421 107/20/18 1c. INITIAL FIRANCING STATEMENT FILE NUMBER 2018 4997421 07/20/18 1b. This FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/2020 2018 4997421 07/20/18 1c. INITIAL FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/2020 2018 4997421 07/20/18 1c. INITIAL FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/2020 2018 4997421 07/20/18 1c. INITIAL FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/20/20 2018 4997421 07/20/18 1d. INITIAL FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/20/20 2018 4997421 07/20/18 1d. INITIAL FIRANCING STATEMENT AMENOMENT is to be 66ed flor record) Filed: 6323 FM 11/10/20/20 2018 4997421 07/20/18 1d. INITIAL FIRANCING STATEMENT AMENOMENT AMENOME
E. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) C. SEND ACKNOWLEDGMENT TO: (Name and Address) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER 1b. This FINANCING STATEMENT FILE NUMBER 1c. The FINANCING STATEMENT FILE NUMBER 1d. This FINANCING STATEMENT AMENDMENT is to be filled flor record) filer; glagd Annother Addressing From LUCCAMP and provide Deleter's name in Rem 13 L. TERMINATION. Effectiveness of the Financing Statement identified above is ferminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement. J. ASSIGNMENT (full or partial): Provide name of Assignee in litem 7a or 7b. and address of Assignee in Rem 7c and name of Assigner in item 9 For partial assignment, complete terms 7 and 9 and also indicate affected collateral in item 5 L. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law DELETE numer. Give record name is an address of these two boxes: CHANGE name and/or address: Complete CHANGE name and/or address: Complete Bis INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX To HANGE OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only any same (7a or 7b) take exact. Mil rame, do not only, or abbreviate any pail of the Debtor's pane). Take ORGANIZATION'S NAME OR To INDIVIDUAL'S SURNAME
C. SEND ACKNOWLEDGMENT TO. (Name and Address) LC.C. Initial Filing No: 2018 4997421 Amendment No: 2020 7862766 Service Request No: 2020 7862766 Service Request No: 20208331300 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 18. (NITIAL FINANCING STATEMENT FILE NUMBER 20184997421 07/20/18 The Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement assignment. Complete terms 7 and 9 and also indicate affected collateral in item 8 ADD Check one of these three boxes to conflicted for the additional period provided by applicable law conflicted for the additional period provided by applicable law AND Check one of these three boxes to Change files two boxes: This Change affects Diebter or Secured Party information Change - provide only one name (6a or 8b) 6a CURRENT RECORD IN FORMATION. Complete for Party Information Change - provide only one name (7a or 7b) (use exact. full name, do not until medity, or abbreviate any paid of the Debtor's name). 7a CHANGED OR ADDED IN FORMATION: Complete for Party Information Change - provide only one name (6a or 8b) 7b INDIVIDUAL'S SURNAME
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER 20184997421 07/20/18 1b.
10. Initial Financing Statement file NUMBER 2018497421 07/20/18 10. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement. 3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assigner in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check agg of these two boxes: AND. Check agg of these three boxes to: CHANGE name analor address: Complete This Change affects Debtor or Secured Party of record item 6a or 6b and item 7a or 7b and item 7c. CHANGE name analor address: Complete This Change affects Debtor or Secured Party of record item 6a or 6b. and item 7a or 7b and item 7c. The RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only ging name (7a or 7b) (use exact, full name, do not onit, modify, or abbreviate any part of the Cebtor's name) 7a. ORGANIZATION'S NAME
10. Initial Financing Statement file NUMBER 2018497421 07/20/18 10. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement. 3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assigner in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check agg of these two boxes: AND. Check agg of these three boxes to: CHANGE name analor address: Complete This Change affects Debtor or Secured Party of record item 6a or 6b and item 7a or 7b and item 7c. CHANGE name analor address: Complete This Change affects Debtor or Secured Party of record item 6a or 6b. and item 7a or 7b and item 7c. The RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7c. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only ging name (7a or 7b) (use exact, full name, do not onit, modify, or abbreviate any part of the Cebtor's name) 7a. ORGANIZATION'S NAME
20184997421 07/20/18 Correcorded) in the REAL ESTATE RECORDS Fier: attach Amendment Additional (Form UCC34d) and provide Debtor's name in 8em 13 [Insert Provided in the REAL ESTATE RECORDS Fier: attach Amendment Additional (Form UCC34d) and provide Debtor's name in 8em 13 [Insert Provided in the REAL ESTATE RECORDS Fier: attach Amendment Additional (Form UCC34d) and provide Debtor's name in 8em 13 [Insert Provided Insert Provided Provided Debtor's name in 8em 13 [Insert Provided Insert Provided Provided Debtor's name in 8em 13 [Insert Provided Insert Provided In
Statement 3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check one of these three boxes to: Check one of these three boxes to: Change affects Debtor or Secured Party of record item 6a or 6b, and item 7a or 7b and item 7c. DELETE name: Give record name for 7b and item 7c. 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7b. INDIVIDUAL'S SURNAME OR 7b. INDIVIDUAL'S SURNAME
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check and of these two boxes: AND Check and of these three boxes to: CHANGE name and/or address: Complete This Change affects Debtor or Secured Party of record Item 6a or 6b; and item 7c 7 and item 7c 7a or 7b, and item 7c 1b be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only and name (6a or 6b) 6a. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)//INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only and name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME
continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects Debtor or Secured Party of record item 6a or 6b, and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a ORGANIZATION'S NAME 7b INDIVIDUAL'S SURNAME OR 7c INDIVIDUAL'S SURNAME OR 7b INDIVIDUAL'S SURNAME
Check one of these two boxes: This Change affects Debtor or Secured Party of record tem 6a or 6b, and item 7a or 7b and item 7c. To 7b, and item 7c. To be deleted in item 6a or 6b. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADD name: Complete item 1be 1be deleted in item 6a or 6b To 7b, and item 7c. To and i
This Change affects Debtor or Secured Party of record liters 6a or 6b, and item 7a or 7b and item 7c 7a or 7b, and item 7c 1b be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME
6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) fuse exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME
7a. ORGANIZATION'S NAME. OR 7b. INDIVIDUAL'S SURNAME
7a. ORGANIZATION'S NAME. OR 7b. INDIVIDUAL'S SURNAME
76 INDIVIDUAL'S SURNAME
INDIVIDUAL'S FIRST PERSONAL NAME
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
76. MAILING ADDRESS QITY STATE: POSTAL CODE COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes. ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor
9a ORGANIZATION'S NAME First Midwest Bank, as Administrative Agent
OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA:

International AssociTRADEMARKIMINIStrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 007316 FRAME: 0818



KAY KIM McDermott Will & Emery LLP 2049 Century Park East **Suite 3800** Los Angeles, CA 90067-3208

Date: 11/13/2020 Order #: 77624310 Customer #: 507197 Reference 1: 106098.0010

Reference 2: --

Target Name: 20184997413

Jurisdiction: Secretary of State, Delaware

Filing Type: Termination Filing

Searched Through: --See attached filing acknowledgement

Document Listing:

Results:

File #	File Date	Type of Filing
2020 7863139	11/10/2020	Termination

SEAN MOORE Service Solutions Team 2 555 Capitol Mall Ste 1150 Sacramento, CA 95814 8008748820 sean.moore@wolterskluwer.com This report contains information compiled from sources which CT Corporation considers reliable but does not control. The information provided is not a certified record of the applicable jurisdiction unless otherwise indicated. CT Corporation does not (i) warrant or guarantee the accuracy, completion or timeliness of the information provided or (ii) accept any liability for delays, errors or omissions in the information provided. CT Corporation is not an insurer with regard to this information or these services. Under no circumstances shall CT Corporation be liable for any loss of underlying collateral or loss (or decreased priority) of security interest in connection with this information or these services. Any categorization of search results is provided for convenience only and is not to be construed as a legal opinion concerning the status of filings.

	CC FINANCING STATEMENT AMENDMEN	IT					
سنسنح	NAME & PHONE OF CONTACT AT FILER (optional)	000AP000					
B. E-MAIL CONTACT AT FILER (optional)				Delaware Department of State U.C.C. Filing Section			
C. 3	SEND ACKNOWLEDGMENT TO: (Name and Address)				iled: 05:25 PM 11/ Initial Filing No: 1		
r	<u> </u>		1		endment No: 2020		
				Servi	re Request No: 2	020833	1389
8				5 and 1 d5 d	r grand and the		ere sin est
1			No. 1	* *	e e d		
L	 .		THE ABOVE	SPACE IS FO	R FILING OFFICE	USE O	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20184997413 07/20/18			1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addandum (Form UCC3Ad) and provide Debtor's name in item 13				
2. 🙀	TERMINATION: Effectiveness of the Financing Statement identified abo Statement	ve is terminati	ed with respect to the security	interest(s) of Se	cured Party authoriza	ng this T	ermination
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affected			name of Assigno	r in item 9		
4.	CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	bove with resp	ect to the security interest(s)	of Secured Party	authorizing this Con	tinuation	Statement is
5.	PARTY INFORMATION CHANGE:						
ban	heck one of these two boxes: AND Check or			DD name: Compl	nin Sinon Puri Proper	A	
With the Real Property lies	nis Change affects Debtor or Secured Party of record item	6a or 6b; <u>and</u> it	em 7a or 7b <u>and</u> item 7c7a	or 7b. and item	to be dele	nana. O eted in ite	ive record name in 6a or 6b
	CURRENT RECORD INFORMATION: Complete for Party Information Cha 6a. ORGANIZATION'S NAME	nge - provide o	nly <u>one</u> name (6a or 6b)				***************************************
OR	6b. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME	ADDITIONAL NAME(S)/INITIAL		L(S)	SUFFIX
7. C	HANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	ation Change - pro	vide only ggg name (7a or 7b) (use exa	ct, full name, do not c	mit, modify, or abbreviate a	ny part of t	ne Debtor's name)
	7a ORGANIZATION'S NAME						
OR	b INDIVIDUAL'S SURNAME						
	INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
7c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE		COUNTRY
	acc control only control of the cont						
8.	-	D collateral	DELETE collateral	RESTATE	covered collateral		SIGN collateral
	Indicate collateral:						
				ver a second		-	-
9. N	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A this is an Amendment authorized by a DEBTOR, check here — and provide	MENDMENT name of author		r 9b) (name of A	isignor, if this is an As	signmen)
	9a. ORGANIZATION'S NAME		in tanan di salah salah salah salah salah di salah	in the state of th	annersoni (*) (*) immossamma (*) annossammassamma	eletet ensettet et eiselen en	سسين بيديد
OR	First Midwest Bank, as Administrative Ag						12/22/22
*****	9b. INDIVIDUAL'S SURNAMÉ	FIRST PER	SONAL NAME	ADDITIC	DNAL NAME(S)/INITIA	L(S)	SUFFIX
10	ODTIONAL EN EO DEFEDENCE CATA.			1			1
	OPTIONAL FILER REFERENCE DATA:				reni pideinia nego mereti kirikin yin k arikin dalah kepalaman dan		نجيث

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

RECORDED: 06/04/2021

REEL: 007316 FRAME: 0820