

07-23-1999



101099668

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

7-22-99

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type 7-22-99		Conveyance Type	
<input type="checkbox"/> New	<input type="checkbox"/> Resubmission (Non-Recordation) Document ID # <input type="text"/>	<input type="checkbox"/> Assignment	<input type="checkbox"/> License
<input type="checkbox"/> Correction of PTO Error Reel # <input type="text"/> Frame # <input type="text"/>	<input type="checkbox"/> Corrective Document Reel # <input type="text"/> Frame # <input type="text"/>	<input type="checkbox"/> Security Agreement	<input type="checkbox"/> Nunc Pro Tunc Assignment Effective Date Month Day Year <input type="text"/>
		<input checked="" type="checkbox"/> Change of Name	
		<input type="checkbox"/> Other	<input type="text"/>

Conveying Party Mark if additional names of conveying parties attached

Name Execution Date
Month Day Year

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)
City State/Country Zip Code

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

FOR OFFICE USE ONLY

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07/23/1999 MTHAI1 00000073 75490276

01 FC:481 40.00 DP
02 FC:481 200.00 DP
Public burden reporting for this collection is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK
REEL: 001932 FRAME: 0626

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

(516) 663-6682

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text" value="75/490276"/>	<input type="text" value="75/440322"/>	<input type="text" value="75/676979"/>
<input type="text" value="75/440375"/>	<input type="text" value="75/493074"/>	<input type="text"/>
<input type="text" value="75/439907"/>	<input type="text" value="75/440323"/>	<input type="text"/>

<input type="text" value="2,253,675"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="2,249,335"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

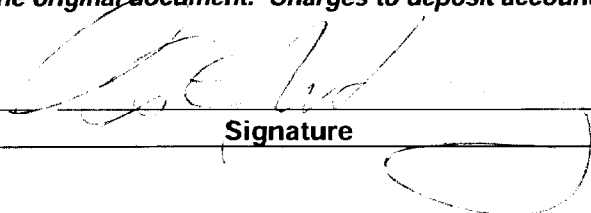
No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Christine McInerney

Name of Person Signing



Signature

July 19, 1999

Date Signed

RECORDATION FORM COVER SHEET CONTINUATION TRADEMARKS ONLY

Conveying Party

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship State of Incorporation/Organization

Receiving Party

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Individual General Partnership Limited Partnership

Corporation Association

Other

Citizenship/State of Incorporation/Organization

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Trademark Application Number(s) or Registration Number(s)

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Mark if additional numbers attached

Trademark Application Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Registration Number(s)

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**FILING RECEIPT OF
THE NEW YORK SECRETARY OF STATE**

NEW YORK DEPARTMENT OF STATE
DIVISION OF CORPORATIONS AND STATE SECURITIES

FILE NO. 1223-60061

FILE NO. 1223-60061

ENTITY NAME : ATKINS RUTLEDGE, INC.

DOCUMENT TYPE : AMENDMENT (CORRECTED ADDRESSES)
NONE

ISSUE DATE : 1998

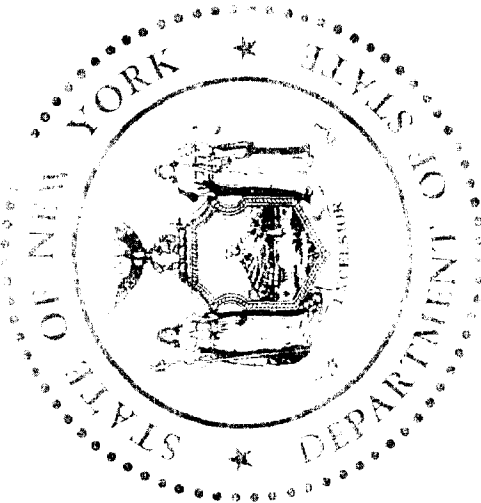
SERVICE COMPANY : CI CORPORATION SYSTEM

ISSUE FILE NO. : 07

FILED: 03/30/1998

FILE NO. 1223-60061

ADDRESS FOR PROCEEDS



REGISTERED CLIENT

FILED

RUSKIN, RUSKIN, EVANS & HILFISHER, INC.
170 OLD COUNTRY ROAD

ALBANY, NY 12201-4306

FILED : 03/30/1998
CASH : 00.00
CHECK : 00.00
DEBIT : 00.00
TOTAL : 00.00

NET FID : 00.00

State of New York }
Department of State } ^{ss:}

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.

Witness my hand and seal of the Department of State on APR 01 1998



A handwritten signature in black ink, appearing to read "J. Clark", written over a horizontal line.

Special Deputy Secretary of State

DOS-1266 (5/96)

CT-07

980330000

885

**CERTIFICATE OF AMENDMENT OF
THE CERTIFICATE OF INCORPORATION OF
COMPLEMENTARY FORMULATIONS, INC.**

(Under Section 805 of the Business Corporation Law)

The undersigned, being the sole shareholder, President and Secretary of Complementary Formulations, Inc. does hereby certify:

1. The name of the corporation is Complementary Formulations, Inc.
2. The Certificate of Incorporation was filed with the Department of State on July 13, 1989, under the name of Complimentary Formulations, Inc.
3. The Certificate of Incorporation is amended to change the corporate name.
4. To effect the foregoing, Paragraph "FIRST" of the Certificate, which sets forth the name of the Corporation, is amended to read as follows:

"FIRST: The name of the corporation is Atkins Nutritionals, Inc.

5. The amendment to the Certificate of Incorporation was authorized by the unanimous written consent of the Board of Directors, followed by the written consent of the sole shareholder of the Corporation.

IN WITNESS WHEREOF, the undersigned has executed this Certificate this 25th day of March, 1998, and affirms the statements made herein as true under penalties of perjury.

/s/Robert C. Atkins

Robert C. Atkins
Sole Shareholder, President,
And Secretary

980330000 805

FILED

MAR 30 4 20 PM '98

Certificate Of Amendment
Of The
Certificate of Incorporation

Of

ICC
STATE OF NEW YORK
DEPARTMENT OF STATE
FILED MAR 30 1998
TAX \$ _____
BY: [Signature]
New York

COMPLEMENTARY FORMULATIONS, INC.

RECEIVED

MAR 30 2 20 PM '98

under section 805
of the Business Corporation Law

RECEIVED

MAR 19 12 05 PM '98

Filed By: RUSKIN, MOSCOU, EVANS &
FALTISCHEK, P.C.

Address: 170 Old Country Road
Mineola, NY 11501-4366

dm

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