

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
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NATURE OF CONVEYANCE:	MERGER
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CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Cardinale, LLC		07/01/2002	LIMITED LIABILITY COMPANY: CALIFORNIA

RECEIVING PARTY DATA	
Name:	Jackson Family Farms, LLC
Street Address:	421 Aviation Blvd
Internal Address:	Legal Dept
City:	Santa Rosa
State/Country:	CALIFORNIA
Postal Code:	95403
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA

PROPERTY NUMBERS Total: 1		
Property Type	Number	Word Mark
Registration Number:	2608069	ATALON

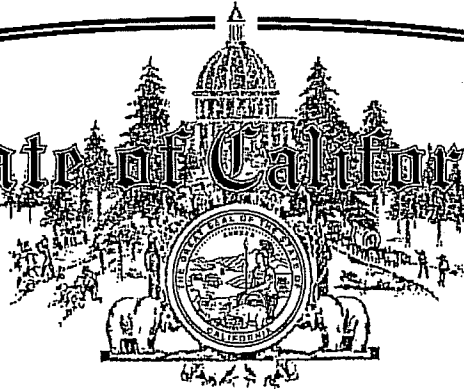
CORRESPONDENCE DATA	
Fax Number:	(707)547-4767
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	707-544-4000
Email:	liz.bermudez@kjmail.com
Correspondent Name:	Jackson Enterprises
Address Line 1:	421 Aviation Blvd
Address Line 2:	Legal Dept
Address Line 4:	Santa Rosa, CALIFORNIA 95403

NAME OF SUBMITTER:	Liz Bermudez
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Total Attachments: 3 source=Cardinale Cert of Merger#page1.tif source=Cardinale Cert of Merger#page2.tif source=Cardinale Cert of Merger#page3.tif
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OP \$40.00 2608069

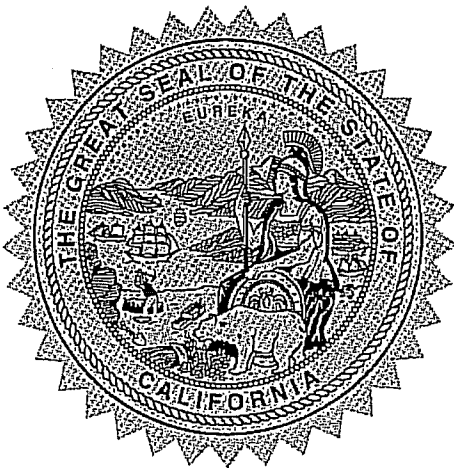
State of California



SECRETARY OF STATE

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 3 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

JUL - 1, 2002

Secretary of State



State of California
 Bill Jones
 Secretary of State

LIMITED LIABILITY COMPANY
 CERTIFICATE OF MERGER

(Corporations Code Section 17552)

Filing Fee – Please see instructions.
 IMPORTANT – Read instructions before completing this form.

ENDORSED - FILED
 In the office of the Secretary of State
 of the State of California

JUL - 1 2002

BILL JONES, Secretary of State

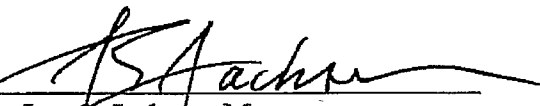
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1. Name of surviving entity: JACKSON FAMILY FARMS, LLC	2. Type of entity: LLC	3. Secretary of State File Number: 199534610021	4. Jurisdiction: CALIFORNIA
5. Name of disappearing entity: CARDINALE, LLC	6. Type of entity: LLC	7. Secretary of State File Number: 199534610019	8. Jurisdiction: CALIFORNIA
9. Future effective date, if any: JULY Month 01 Day 2002 Year			
10. If a vote was required pursuant to Section 17551 or Section 1113, enter the outstanding interests of each class entitled to vote on the merger and the percentage of vote required:			
<u>Surviving Entity</u>		<u>Disappearing Entity</u>	
<u>Each class entitled to vote</u>	<u>Percentage of vote required</u>	<u>Each class entitled to vote</u>	<u>Percentage of vote required</u>
SINGLE MEMBER INTERESTS	100%	SINGLE MEMBER INTERESTS	100%
11. The principal terms of the agreement of merger were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required.			
SECTION 12 IS ONLY APPLICABLE IF THE SURVIVING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, COMPLETE ITEM 12 AND PROCEED TO ITEM 15.			
12. Requisite changes to the information set forth in the Articles of Organization of the surviving limited liability company resulting from the merger. Attach additional pages if necessary.			
SECTIONS 13 AND 14 ARE APPLICABLE IF THE SURVIVING ENTITY IS A FOREIGN LIMITED LIABILITY COMPANY OR OTHER BUSINESS ENTITY. COMPLETE ITEMS 13 AND 14.			
13. Principal business address of the surviving foreign limited liability company or other business entity:			
Address:			
City:		State:	Zip Code:
14. Other information required to be stated in the Certificate of Merger by the laws under which each constituent other business entity is organized. Attach additional pages if necessary.			
15. Number of pages attached, if any: 2			
16. I certify that the statements contained in this document are true and correct of my own knowledge. I declare that I am the person who is executing this instrument, which execution is my act and deed.			
SEE ATTACHED			
_____ Signature of Authorized Person for the Surviving Entity Date		_____ Type or Print Name and Title of Person Signing Date	
_____ Signature of Authorized Person for the Surviving Entity Date		_____ Type or Print Name and Title of Person Signing Date	
SEE ATTACHED			
_____ Signature of Authorized Person for the Disappearing Entity Date		_____ Type or Print Name and Title of Person Signing Date	
_____ Signature of Authorized Person for the Disappearing Entity Date		_____ Type or Print Name and Title of Person Signing Date	

Surviving Entity:

JACKSON FAMILY FARMS, LLC

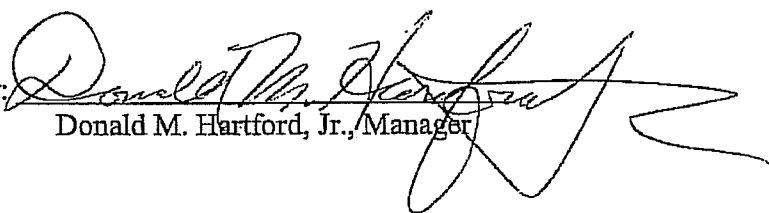
By:


Jess S. Jackson, Manager

By:


Barbara R. Banke, Manager


By:


Donald M. Hartford, Jr., Manager

Disappearing Entity:

CARDINALE, LLC

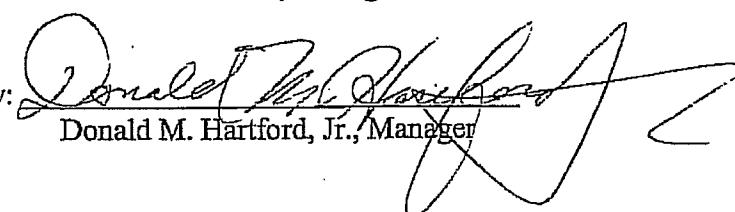
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