Form PTO 1594

U.S. DEPARTMENT OF COMMERCE

102612671 5-29-03 (modified) U.S. Patent and Trademark Office To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof. 2. Name and address of receiving party(ies) Hawkins Pro-Cuts, Inc. Name: Pro-Cuts Franchise Corporation 500 Grapevine Highway, Suite 400 Internal Address: Hurst, TX 76054 Street Address: 500 Grapevine Highway, Suite 400 () Individual(s) () Association City: Hurst State: <u>TX</u> ZIP <u>76054</u> () General Partnership () Limited Partnership () Individual Citizenship (X) Other <u>Texas corporation</u> () Association, State Additional name(s) of conveying party(ies) attached? Yes () No (X) () General Partnership 3. Nature of conveyance: () Limited Partnership () Assignment () Merger (X) Other <u>Texas corporation</u> () Security Agreement (X) Change of Name If assignee is not domiciled in the United States, and mestic () Other ____ representative designation is attached. Yes () No () (Designations must be a separate document from assignment) Execution Date: June 23, 2000 Additional name(s) & address(es) attached? Yes () No (X) 4. Application number(s) or registration number(s): B. Trademark Registration Number(s): A. Trademark Application Number(s): 2,177,966; 1,461,575; 2,000,483; 1,937,937; 1,144,560; 1,937,938; and 1,899,300 Additional numbers attached? Yes () No (X) 5. Name and address of party to whom correspondence 6. Total number of applications and registrations concerning document should be mailed: involved:(7) Malcolm L. Moore Name: 7. Total fee (37 CFR 3.41): \$ 190.00 Internal Address: MOORE, HANSEN & SUMNER (X) Enclosed () Authorized to be charged to deposit account Street Address: 2900 Wells Fargo Center 90 South Seventh Street 8. Deposit account number: City: Minneapolis State: MN ZIP 55402 /02/2003 LMUELLER 00000073 2177966 (Attach duplicate copy of this page if paying by deposit account) 40.00 OP C:8521 DO NOT USE THIS SPACE 150.00 DP C:8522 9. 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. Malcolm L. Moore Name of Person Signing √Signature Total number of pages including cover sheet, attachments, and documents (4)

Mail documents to be recorded with required cover sheet information to: Mail Stop Assignment Recordation Services, Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450



Office of the Secretary of State

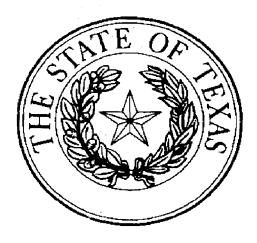
The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

PRO-CUTS FRANCHISE CORPORATION Filing Number: 12802506

Application For Amended Certificate Of Authority

July 17, 2000

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 24, 2003.







Office of the Secretary of State Corporations Section P.O. Box 13697 Austin, Texas 78711-3697

In the Office of the Secretary of State of Texas

JUL 17 2000

Corporations Section

APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

Pursuant to the law governing the undersigned corporation or limited liability company, the entity makes this application to amend its certificate of authority to transact business in Texas and provides the following information:

1. The name of the entity as it currently appears on the records of the secretary of state

1 ex	as and provides the tenowing information:	
1.	The name of the entity as it currently appears on the records of the secretary	of state
	of Texas is HAWKINS PRO-CUTS, INC.	
2.	(If the entity's name was previously unavailable and the entity elected assumed name in Texas, complete the following.) The assumed name of the currently appears on the records of the secretary of state is	to use an entity as it
3.	A certificate of authority was issued to the entity on the following date: 08/1	3/99
4.	The name has been changed to PRO-CUTS FRANCHISE CORPORATION	
·	The cutity name has not been changed.	
5.	If applicable, the name that it elects to use hereafter in the state of Texas is	
6.	It desires to pursue in Texas purposes other than, or in addition to, those	oùthorized
	by its certificate of authority, as follows:	
	It is authorized to pursue such purpose or purposes in the state or country laws of which it is organized.	under the
7.	It desires to change the statement(s) contained in item(s) number	of the
	original or amended certificate of authority to read as follows:	
	PRO-CHTS FRANCHISE, CORPORATIO	764
	By Wash then	
	Charles W. Stevens, Jr.	
	Its Secretary	
	Authorized Officer of Corneration	al .

Authorized Officer of Corporation Authorized Manager or Member of LLC

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "HAWKINS PRO-CUTS, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "PRO-CUTS FRANCHISE CORPORATION", THE TWENTY-THIRD DAY OF JUNE, A.D. 2000, AT 9 O'CLOCK A.M.

3080678 8320 001323823

RECORDED: 12/01/2003



Edward J. Freel, Secretary of State 0521874

AUTHENTICATION:

06-26-00

DATE:

TRADEMARK REEL: 002872 FRAME: 0042