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To the Honorable Commissioner of

03-25-2004  
102703637

Remarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):  
Flavor Burst Co.  
 Individual(s)       Association  
 General Partnership       Limited Partnership  
 Corporation-State  
 Other Joint Venture

Additional name(s) of conveying party(ies) attached?  Yes  No

3. Nature of conveyance:  
 Assignment       Merger  
 Security Agreement       Change of Name  
 Other \_\_\_\_\_  
Execution Date: \_\_\_\_\_

2. Name and address of receiving party(ies)  
Name: Flavor Burst Co., L.L.P.  
Internal Address: \_\_\_\_\_  
Street Address: 499 Commerce Drive  
City: Danville State: Indiana Zip: 46122  
 Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation-State \_\_\_\_\_  
 Other Limited Liability Partnership  
If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
(Designations must be a separate document from assignment)  
Additional name(s) & address(es) attached?  Yes  No

4. Application number(s) or registration number(s):  
A. Trademark Application No.(s)  
B. Trademark Registration No.(s)  
1,710,823  
Additional number(s) attached  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:  
Name: Charles J. Brauch  
Internal Address: Woodard, Emhardt, Moriarty, McNett & Henry LLP  
Street Address: Bank One Center/Tower, 111 Monument Circle, Suite 3700  
City: Indianapolis State: Indiana Zip: 46204

6. Total number of applications and registrations involved: 1  
7. Total fee (37 CFR 3.41) \$ 40.00  
 Enclosed  
 Authorized to be charged to deposit account  
8. Deposit account number:  
23-3030  
(Attach duplicate copy of this page if paying by deposit account)

**DO NOT USE THIS SPACE**

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.*  
Charles J. Brauch      Charles J. Brauch      March 12, 2004  
Name of Person Signing      Signature      Date  
Total number of pages including cover sheet, attachments, and document: 3

03/24/2004 NGETACHE 00000040 1710023

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40.00 OP

Mail documents to be recorded with required cover sheet information to:  
Director of the U.S. Patent and Trademark Office, Mail Stop Assignment Recordation Services  
Washington, D.C. 20231  
VIA FACSIMILE (703) 306-5995



03-16-2004

U.S. Patent & TMO/TM Mail Rpt Dt. #72

**TRADEMARK**  
**REEL: 002934 FRAME: 0915**

**State of Indiana**  
**Office of the Secretary of State**

**CERTIFICATE OF ASSUMED BUSINESS NAME**

of

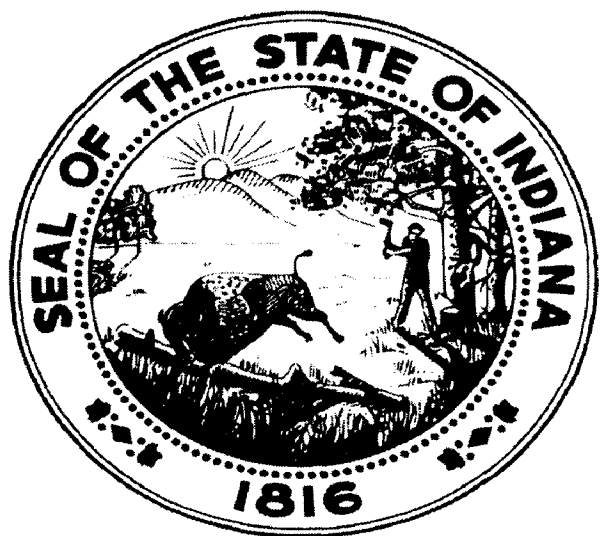
**FLAVOR BURST CO., L.L.P.**

I, SUE ANNE GILROY, Secretary of State of Indiana, hereby certify that Certificate of Assumed Business Name of the above Domestic Limited Liability Partnership (LLP) have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Uniform Partnership Act.

Following said transaction the entity named above will be doing business under the assumed business name(s) of:

**FLAVOR BURST CO.**  
**FLAVOR BURST**

NOW, THEREFORE, with this document I certify that said transaction will become effective Tuesday, May 21, 2002.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 21, 2002.

*Sue Anne Gilroy*

SUE ANNE GILROY,  
SECRETARY OF STATE

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**TRADEMARK**  
**REEL: 002934 FRAME: 0916**

