Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:

NEW ASSIGNMENT

NATURE OF CONVEYANCE:

MERGER

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Quality Food Centers, Inc.		08/11/2004	CORPORATION: OHIO

RECEIVING PARTY DATA

Name:	Fred Meyer Stores, Inc.
Street Address:	3800 S.E. 22nd Avenue
Internal Address:	P.O. Box 42121
City:	Portland
State/Country:	OREGON
Postal Code:	97242
Entity Type:	CORPORATION: OHIO

PROPERTY NUMBERS Total: 8

Property Type	Number	Word Mark
Registration Number:	1747588	QFC
Registration Number:	1749082	QUALITY FOOD CENTERS
Registration Number:	1901284	NORTHERN COVE
Registration Number:	1909413	CASCADE MIST
Registration Number:	2210956	YOU KNOW IT'S GOING TO BE GOOD
Registration Number:	2301350	QFC QUALITY FOOD CENTERS
Registration Number:	2506474	MCDERMOTT'S
Registration Number:	2531747	THE ART OF FOOD

CORRESPONDENCE DATA

Fax Number: (503)228-9446

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: (503) 226-7391

Email: ptotmdocket@klarquist.com

Correspondent Name: Ramon A. Klitzke II Address Line 1: 121 S.W. Salmon Street

REEL: 002934 FRAME: 0990

TRADEMARK

Address Line 2: One World Trade Center, Suite 1600 Address Line 4: Portland, OREGON 97204 ATTORNEY DOCKET NUMBER: 449-69475-01 NAME OF SUBMITTER: Taunya Wilcox **Total Attachments: 8** source=merger p1#page1.tif source=merger p2#page1.tif source=merger p3#page1.tif source=merger p4#page1.tif source=merger p5#page1.tif source=merger p6#page1.tif source=merger p7#page1.tif source=merger p8#page1.tif

DATE: 08/13/2004 DOCUMENT ID 200422601350 DESCRIPTION
MERGED OUT OF EXISTENCE (MEX)

FILING

EXPE

PENALTY

CERT

COPY .00

Receipt

This is not a bill. Please do not remit payment.

CORPORATION SERVICE COMPANY ATTN: LISA VAIDO 887 SOUTH HIGH STREET COLUMBUS, OH 43206

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

1413489

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

QUALITY FOOD CENTERS, INC.

and, that said business records show the filing and recording of

Document(s):

MERGED OUT OF EXISTENCE

Document No(s):

200422601350



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 14th day of August, A.D. 2004.

Ohio Secretary of State



Prescribed by J. Kenneth Blackwell

Ohio Secretary of State Central Ohio: (614) 466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453) Expedite this Form: (Select One)

Matticorn: Control this Following:

PO Box 1390
Columbus, OH 43216
Requires an additional fee of \$100 ***

PO Box 1329
Columbus, OH 43216

www.state.oh.us/sos e-mail: busserv@sos.state.oh.us

CERTIFICATE OF MERGER

(For Domestic or Foreign, Profit or Non-Profit)
Filing Fee \$125.00
(154-MER)

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan, limited liability companies, limited partnerships and/or partnerships with limited liability, desiring to effect a merger, set forth the following facts:

I. SUF	RVIVING ENTITY
A.	The name of the entity surviving the merger is:
	Fred Meyer Stores, Inc.
В.	Name Change: As a result of this merger, the name of the surviving entity has been changed to the following:
,	(Complete only if name of surviving entity is changing through the merger)
C.	The surviving entity is a: (Please check the appropriate box and fill in the appropriate blanks)
	Domestic (Ohio) For-Profit Corporation, charter number 1413490
	· Domestic (Ohio) Non-Profit Corporation, charter number
	Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of and licensed to transact business in the State of Ohio under license number
	Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of and NOT licensed to transact business in the state of Ohio,
	· Domestic (Ohio) Limited Liability Company, with registration number
	Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and registered to do business in the State of Ohio under registration number
	Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and NOT registered to do business in the State of Ohio.
	Domestic (Ohio) Limited Partnership, with registration number
	Foreign (Non-Ohio) Limited Partnership organized under the laws of the state/country of

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and NOT registered to do business in the state	nized under the laws of the te of Ohio.	ne state/country of	
☐ Domestic (Ohio) Partnership having limited	d liability, with the regis	tration number _	
☐ Foreign (Non-Ohio) Partnership having lirr	nited liability organized i	under the laws of the	state/country of
and registered to	o do business in the sta	ite of Ohio under reg	istration number
Foreign (Non-Ohio) Non-Profit incorporation to and licensed to transact business in the state		-	
☐ Foreign (Non-Ohio) Non-Profit incorporation used not licensed to transact business in the s		e/county of	
☐ General partnership not registered with the	e state of Ohio		
II. MERGING ENTITY The name, charter/license/registration number, typ respectively, of which is the entities merging out of all merging entities, please attach a separate sheet (12) (20) (20) (20) (20) (20) (20) (20)	existence are as follower listing the merging e	s: (If this is insuffici	
Name / charter, license or registration number	State/Count	ry of Organization	Type of Entity
Quality Food Centers, Inc.	Ohio/US	SA	Corporation
(charter no. 1413489)			
II. MERGER AGREEMENT ON FILE The name and mailing address of the person or en agreement of merger upon written request:		roger Co., 1	014 Vine St.
Dorothy D. Roberts		IE: P.U. HOY Addresse	s are NOT acceptable.
Dorothy D. Roberts (name)			
		45202 (zip cod	de)

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VI. STATUTORY AGENT	
	utory agent upon whom any process, notice or demand may be
served is:	a/a The Wroger Co. 1014 Wins Ch
Paul W. Heldman	c/o The Kroger Co., 1014 Vine St. (street) NOTE: P.O. Box Addresses are NOT acceptable.
(name)	(Sudet) NOTE. F.O. DOX Addresses are NOT acceptable.
Cincinnati	, Ohio 45202
(city, village or township)	(zip code)
(This item MUST be completed if the surviving entity is authorized to conduct business in the state of Ohio)	a foreign entity which is not licensed, registered or otherwise
VII. ACCEPTANCE OF AGENT	\frown /
The undersigned, named herein as the statutory age	ent for the above referenced surviving entity, hereby
acknowledges and accepts the appointment of statu	itory agent for said entity.
Sig	ent for the above referenced surviving entity, hereby thory agent for said entity. The Hereby that the above referenced surviving entity, hereby the agent that the above referenced surviving entity, hereby the above referenced surviving entity.
	rviving entities if through this merger the statutory agent has e name currently on record with the Secretary of State.)
VIII. STATEMENT OF MERGER Upon filing, or upon such later date as specified here listed surviving entity	ein, the merging entity/entities listed herein shall merge into the
 IX. AMENDMENTS The articles of incorporation, articles of organization, having limited liability (circle appropriate term) of the Attachments are provided 	, certificate of limited partnership or registration of partnership surviving domestic entity have been amended. No Changes
partnership, or partnership having limited liability bank, savings bank, savings and loan, limited lia limited liability, and hereby appoints the following	SURVIVING ENTITY avings bank, savings and loan, limited liability company, limited y desires to transact business in Ohio as a foreign corporation, ability company, limited partnership, or partnership having g as its statutory agent upon whom process, notice or demand Ohio. The name and complete address of the statutory agent
(name)	(street) NOTE: P.O. Box Addresses are NOT acceptable.
	, Ohio
(city, village or township)	(zip code)

The subject surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability irrevocably consents to service of process on the statutory agent listed above as long as the authority of the agent continues, and to service of process upon the Secretary of State of Ohio if the agent cannot be found, if the corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability fails to designate another agent when required to do so, or if the foreign corporation's, bank's, savings bank's, savings and loan's, limited liability company's, limited partnership's or partnership having limited liability's license or registration to do business on Ohio expires or is canceled.

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For (If the	alifying entity also states as follows: (C eign Notice Under Section 1703.03' he qualifying entity is a foreign bank, s st be completed.)	1	d loan, then the follow	ring information		
(a.)	The name of the Foreign Nationally/Federally chartered bank, savings bank, or savings and loan association is					
(b.)	The name(s) of any Trade Name(s)	under which the corporation	will conduct busines	s :		
(c.)	The location of the main office (non-C	Ohio) shall be:				
	(street address)	NOTE: P.O. B	ox Addresses are NOT	acceptable.		
	(city, township, or village)	(county)	(state)	(zip code)		
(d.)	The principal office location in the sta	ite of Ohio shall be:				
	(street address)	NOTE: P.O. B	ox Addresses are NOT	acceptable.		
			<u>Ohio</u>			
	(city, township, or village)	(county)	(state)	(zip code)		
(e.)	(Please note, if there will not be an The corporation will exercise the folio (Please provide a brief summary of the	owing purpose(s) in the state	of Ohio:	not sufficient)		
	eign Qualifying Limited Liability Co ne qualifying entity is a foreign limited l		ng information must b	e completed.)		
(a.)	The name of the limited liability comp	any in its state of organization	on/registration is			
(b.)	The name under which the limited lia	bility company desires to tra	nsact business in Oh	io is		

B.

	(street address)	NOTE: P.O. Box Add	fresses are NOT	acceptable.
	(city, township, or village)		(state)	(zip code
	reign Qualifying Limited Partnersh	nip d partnership, the following informati	on must be on	mnlotod)
) The name of the limited partnership		on mast be co	триесесу.
(b.)	The limited partnership was formed	f on		
(c.)	The address of the office of the limit	ited partnership in its state/country o	f organization i	is:
	(street address)	NOTE: P.O. Box Add	resses are NOT	acceptable.
	(city, township, or village)	(county)	(state)	(zip code
	(street address)	NOTE: P.O. Box Addi	resses are NOT a	scceptable.
	(city, township, or village)	(county)	(state)	(zip code
(e.)	The names and business or resider follows:	nce addresses of the General partne	rs of the partne	ership are as
	Name	Address		
uffici	ent space to cover this item, please attach a	separate sheet listing the general partners a	nd their respective	e addresses)
	The address of the office where a list	separate sheet listing the general partners a st of the names and business or resi e capital contributions is to be mainta	dence address	ŕ
	The address of the office where a list	st of the names and business or resi	dence address ined is:	es of the
	The address of the office where a limited partners and their respective	st of the names and business or resi e capital contributions is to be mainta	dence address ined is:	es of the

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The limited partnership hereby certifies that it shall maintain said records until the registration of the limited partnership in Ohio is canceled or withdrawn.

,,	e name of the partnership shall be	Limited Liability			
(b.) Ple	Please complete the following appropriate section (either item b(l) or b(2)):				
(1.	.) The address of the partnership's	principal office in Ohio is:			
(str	eet address)	NOTE: P.O. Box Addresses are NOT acceptable.			
		, Ohio			
(city	y, village or township)	(zip code)			
	.) The address of the partnership's	•			
(stre	eet address)	NOTE: P.O. Box Addresses are NOT acceptable.			
_					
(city	y, township, or village)	(state) (zip code			
c.) The	e name and address of a statutory a	agent for service of process in Ohio is as follows:			
(nar	тне)				
(stre	eet address)	NOTE: P.O. Box Addresses are NOT acceptable.			
		, Ohio			
(city	, village or lownship)	(zip code)			
d.) Ple		(zip code) in which the Foreign Limited Liability Partnership has been			
(d.) Ple	ease indicate the state or jurisdiction	in which the Foreign Limited Liability Partnership has been			

The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below.

Fred Meyer Scores, Inc.	Quality Food Centers, Inc.		
(Exact name of entity)	(Exact name of entity)		
By: Paul Herel	By: Jul flek.		
Hs: Paul W. Heldman, Vice President	lts: Paul W. Heldman, Vice President		
Date: august 11, 2084	Date: August 11 2004		
(Exact name of entity)	(Exact name of entity)		
Ву:	Ву:		
Its:	Its:		
Date:	Date:		
(Exact name of entity)	(Exact name of entity)		
Ву:	Ву:		
lts:	lts:		
Date:	Date:		
(Exact name of entity)	(Exact name of entity)		
Ву:	Ву:		
lts:	lts:		
Date:	Date:		
(Exact name of entity)	(Exact name of entity)		
Ву:	Ву:		
its:	its:		
Date:	Date:		

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RECORDED: 09/13/2004

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