

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Change of Entity Status		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Imperial Toy Corporation		12/21/2005	CORPORATION: CALIFORNIA
RECEIVING PARTY DATA			
Name:	Imperial Toy LLC		
Street Address:	2060 East 7th Street		
City:	Los Angeles		
State/Country:	CALIFORNIA		
Postal Code:	90021		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Serial Number:	76629850	HOVER BUBBLE	
CORRESPONDENCE DATA			
Fax Number:	(310)201-2336		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	310-785-6883		
Email:	hwilliams@ggfirm.com		
Correspondent Name:	Herbert P. Williams		
Address Line 1:	1900 Avenue of the Stars, 21st Floor		
Address Line 4:	Los Angeles, CALIFORNIA 90067		
ATTORNEY DOCKET NUMBER:	42100-00047		
NAME OF SUBMITTER:	Herbert P. Williams		
Signature:	/Herbert P. Williams/		
Date:	01/25/2006		

CH \$40.00 76629850

Total Attachments: 3

source=HoverBubble&Des_CoverSheet#page1.tif

source=HoverBubble&Des_ScyofStateDoc#page1.tif

source=HoverBubble&Des_ScyofStateDoc#page2.tif

00694608



State of California Secretary of State

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION - CONVERSION

200535510012 File #

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

DEC 21 2005

IMPORTANT - Read all instructions before completing this form.

This Space For Filing Use Only

CONVERTED ENTITY INFORMATION

1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," "Ltd. Liability Company," "Ltd. Liability Co.," or the abbreviation "LLC" or "L.L.C.")

Imperial Toy LLC

2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.

3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check only one)

[X] ONE MANAGER

[] MORE THAN ONE MANAGER

[] ALL LIMITED LIABILITY COMPANY MEMBER(S)

4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE

2060 East 7th Street

CITY AND STATE

Los Angeles, California

ZIP CODE

90021

5. NAME OF AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and both items 5 and 6 must be completed. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 5 must be completed (leave item 6 blank).)

Peter Tiger

6. IF AN INDIVIDUAL, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA

2060 East 7th Street

CITY

Los Angeles

STATE

CA

ZIP CODE

90021

CONVERTING ENTITY INFORMATION

7. NAME OF CONVERTING ENTITY

Imperial Toy Corporation

8. FORM OF ENTITY

Corporation

9. JURISDICTION

California

10. CA SECRETARY OF STATE FILE NUMBER, IF ANY

C0569838

11. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS:

STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS

75 shares of Common Stock

a majority

ADDITIONAL INFORMATION

12. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

13. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

SIGNATURE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON

12/21/05 DATE

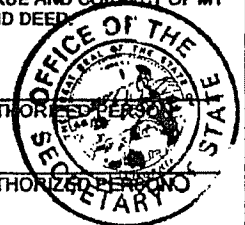
12/21/05 DATE

David Kort, Vice President

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

Susan Kort, Secretary

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON





State of California
Secretary of State

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 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

DEC 21 2005

BRUCE McPHERSON
Secretary of State