

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
LRV Acquisition Corp.		01/23/2003	CORPORATION: OHIO
RECEIVING PARTY DATA			
Name:	KONETA, INC.		
Street Address:	1400 Lunar Drive		
City:	Wapakoneta		
State/Country:	OHIO		
Postal Code:	45895		
Entity Type:	CORPORATION: OHIO		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	1308866	PRO TECTA	
Registration Number:	1732878	PROTECTA	
Registration Number:	1706558	PRO TECTA	
CORRESPONDENCE DATA			
Fax Number:	(513)977-8141		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	513-977-8564		
Email:	tracy.shannon@dinslaw.com		
Correspondent Name:	Joshua A. Lorentz		
Address Line 1:	255 East Fifth Street		
Address Line 2:	1900 Chemed Center		
Address Line 4:	Cincinnati, OHIO 45202		
NAME OF SUBMITTER:	Joshua A. Lorentz		
Signature:	/joshua a lorentz/		

OP \$90.00 1308866

Date:

01/26/2007

Total Attachments: 3

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DATE: 01/28/2003	DOCUMENT ID 200302800270	DESCRIPTION DOMESTIC/AMENDMENT TO ARTICLES (AMD)	FILING 50.00	EXPED .00	PENALTY .00	CERT .00	COPY .00
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Receipt

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

LANCASTER COLONY CORPORATION
 PAT SCHNIEDER
 37 W BROAD ST 5TH FL
 COLUMBUS, OH 43215

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

690131

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
KONETA, INC.

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

Document(s)

DOMESTIC/AMENDMENT TO ARTICLES

Document No(s):

200302800270



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 27th day of January, A.D.
 2003.

J. Kenneth Blackwell
 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)

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

Expedite this Form: (Select One)	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input type="radio"/> No	PO Box 1028 Columbus, OH 43216

Certificate of Amendment by Shareholders or Members (Domestic)
Filing Fee \$50.00

RECEIVED
SECRETARY OF STATE
JAN 27 AM 11:08
STATE SERVICE CENTER

(CHECK ONLY ONE (1) BOX)

<input type="checkbox"/> Amended (122-AMAP) <input checked="" type="checkbox"/> Amendment (125-AMDS)	<input type="checkbox"/> Amended (126-AMAN) <input type="checkbox"/> Amendment (128-AMD)
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Complete the general information in this section for the box checked above.

Name of Corporation: LRV Acquisition Corp.

Charter Number: 690131

Name of Officer: David M. Segal

Title: Secretary

Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

A meeting of the shareholders directors (non-profit amended articles only)

members was duly called and held on _____ (Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise _____ % as the voting power of the corporation.

In a writing signed by all of the shareholders directors (non-profit amended articles only)

members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.
If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: Koneta, Inc.

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

(city, village or township) (county)

THIRD: The purposes of the corporation are as follows:

[Empty box for purposes of the corporation]

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
(Does not apply to box (2))

REQUIRED
Must be authenticated
(signed) by an authorized
representative
(See Instructions)

David M Segal
Authorized Representative David M. Segal
Secretary

January 23, 2003
Date

Authorized Representative

Date

Authorized Representative

Date