

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
PT Metrics, LLC		09/26/2007	LIMITED LIABILITY COMPANY: CALIFORNIA
RECEIVING PARTY DATA			
Name:	BODYREV, LLC		
Street Address:	447 MILLER AVENUE		
Internal Address:	SUITE E		
City:	MILL VALLEY		
State/Country:	CALIFORNIA		
Postal Code:	94941		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		
PROPERTY NUMBERS Total: 13			
Property Type	Number	Word Mark	
Registration Number:	3080629	BODYREV	
Registration Number:	3056445	BODYREV	
Registration Number:	3066762	BODYREV	
Registration Number:	3071962	BODYREV	
Registration Number:	3300090	PERFECT PUSHUP	
Serial Number:	77144577	PERFECT PULLUP	
Serial Number:	77144592	PERFECT SITUP	
Serial Number:	77247984	PERFECT CORE	
Serial Number:	77248055	PERFECT POWER	
Serial Number:	77248091	DEFINE YOURSELF	
Serial Number:	77248109	TURN ON YOUR STRENGTH	
Serial Number:	77248141	PERFECT EXERCISE	
Serial Number:	77248156	PERFECT WORKOUT	

OP \$340.00 3080629

CORRESPONDENCE DATA

Fax Number: (540)242-3993

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

Phone: 5402535332

Email: mailroom@charterip.com

Correspondent Name: Matthew J. Lattig

Address Line 1: 7147 Kenthurst Ln

Address Line 4: The Plains, VIRGINIA 20198

NAME OF SUBMITTER:

Matthew J. Lattig

Signature:

/Matthew J. Lattig/

Date:

07/18/2008

Total Attachments: 2

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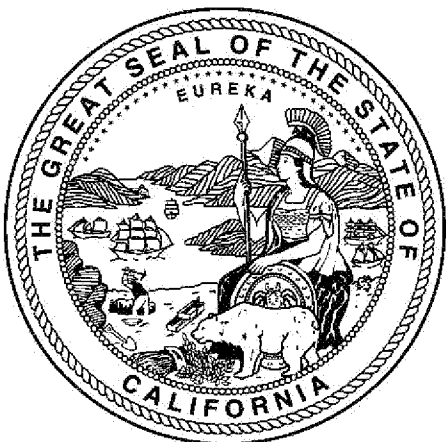
source=26 Sep 2007 name change#page2.tif

State of California
Secretary of State



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) was prepared by and in this office from the record on file, 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

MAR 21 2008

DEBRA BOWEN
Secretary of State



State of California
Secretary of State

LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT

A \$30.00 filing fee must accompany this form.

IMPORTANT - Read instructions before completing this form.

FILED
in the office of the Secretary of State
of the State of California

SEP 26 2007

This Space For Filing Use Only

1. SECRETARY OF STATE FILE NUMBER 200320010112	2. NAME OF LIMITED LIABILITY COMPANY PT Metrics, LLC
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3. COMPLETE ONLY THE SECTIONS WHERE INFORMATION IS BEING CHANGED. ADDITIONAL PAGES MAY BE ATTACHED IF NECESSARY.

A. LIMITED LIABILITY COMPANY NAME (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY," "LTD. LIABILITY CO." OR THE ABBREVIATIONS "LLC" OR "L.L.C.")

BODYREV, LLC

B. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONE):

- ONE MANAGER
- MORE THAN ONE MANAGER
- ALL LIMITED LIABILITY COMPANY MEMBER(S)

C. AMENDMENT TO TEXT OF THE ARTICLES OF ORGANIZATION:

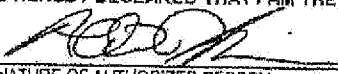
D. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE. OTHER MATTERS MAY INCLUDE A CHANGE IN THE LATEST DATE ON WHICH THE LIMITED LIABILITY COMPANY IS TO DISSOLVE OR ANY CHANGE IN THE EVENTS THAT WILL CAUSE THE DISSOLUTION.

4. FUTURE EFFECTIVE DATE, IF ANY:

MONTH	DAY	YEAR
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5. NUMBER OF PAGES ATTACHED, IF ANY:

6. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.


SIGNATURE OF AUTHORIZED PERSON
Andrew Morrison, Manager
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

9/26/2007
DATE

7. RETURN TO:

NAME	Robert W. Renken
FIRM	Clark & Trevithick
ADDRESS	800 Wilshire Blvd., 12th Floor
CITY/STATE	Los Angeles, CA
ZIP CODE	90017

