

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

|                       |                |
|-----------------------|----------------|
| SUBMISSION TYPE:      | NEW ASSIGNMENT |
| NATURE OF CONVEYANCE: | MERGER         |
| EFFECTIVE DATE:       | 07/01/2008     |

**CONVEYING PARTY DATA**

| Name                           | Formerly | Execution Date | Entity Type                           |
|--------------------------------|----------|----------------|---------------------------------------|
| White Rocket Wine Company, LLC |          | 06/30/2008     | LIMITED LIABILITY COMPANY: CALIFORNIA |

**RECEIVING PARTY DATA**

|                 |                                       |
|-----------------|---------------------------------------|
| Name:           | Jackson Family Farms, LLC             |
| Street Address: | 421 Aviation Boulevard                |
| City:           | Santa Rosa                            |
| State/Country:  | CALIFORNIA                            |
| Postal Code:    | 95403                                 |
| Entity Type:    | LIMITED LIABILITY COMPANY: CALIFORNIA |

**PROPERTY NUMBERS Total: 2**

| Property Type        | Number   | Word Mark    |
|----------------------|----------|--------------|
| Registration Number: | 3392494  | SILVER PALM  |
| Serial Number:       | 77028491 | WHITE ROCKET |

**CORRESPONDENCE DATA**

Fax Number: (312)464-3111  
*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*  
 Phone: 312/464-3100  
 Email: chicagopto@loeb.com  
 Correspondent Name: Daniel D. Frohling  
 Address Line 1: 321 N. Clark Street, Suite 2300  
 Address Line 4: Chicago, ILLINOIS 60654

|                         |                    |
|-------------------------|--------------------|
| ATTORNEY DOCKET NUMBER: | 208735/00072/00106 |
| NAME OF SUBMITTER:      | Daniel D. Frohling |

Signature:

/daniel d frohling/

Date:

11/04/2008

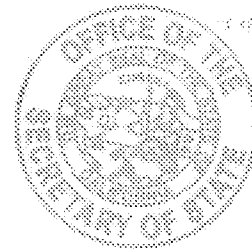
Total Attachments: 3

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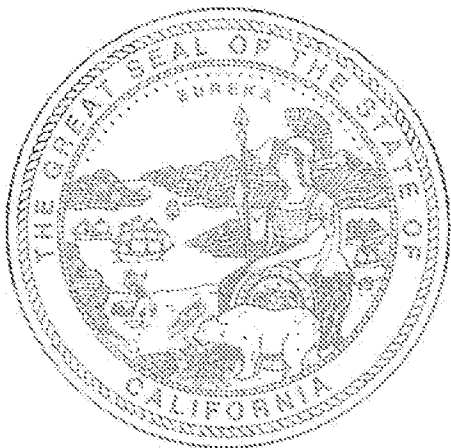
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State of California  
Secretary of State



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

That the attached transcript of 2 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

JUL 08 2008

A handwritten signature in cursive script that reads "Debra Bowen".

DEBRA BOWEN  
Secretary of State

DATE

JUL 01 2008



State of California Secretary of State

OBE MERG

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

JUN 30 2008

CERTIFICATE OF MERGER

(California Corporations Code sections 1113(g), 6019.1, 8019.1, 9640, 12540.1, 15070.4, 15911.14, 16815(b) and 17552)

IMPORTANT --- Read all instructions before completing this form.

This Space For Filing Use Only


| 1. NAME OF SURVIVING ENTITY<br>Jackson Family Farms, LLC  | 2. TYPE OF ENTITY<br>Limited Liability Company | 3. CA SECRETARY OF STATE FILE NUMBER<br>159534810021                      | 4. JURISDICTION<br>California |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
|---|--|---|-------------------------------|-----|--------------------------|--|--|------------------|-----|--------------------------|------------------|-----|--------------------------|-------------|--|------|-------------|--|------|--|--|
| 5. NAME OF DISAPPEARING ENTITY<br>White Rocket Wine Company, LLC  | 6. TYPE OF ENTITY<br>Limited Liability Company | 7. CA SECRETARY OF STATE FILE NUMBER<br>200624010031                      | 8. JURISDICTION<br>California |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 9. THE PRINCIPAL TERMS OF THE AGREEMENT OF MERGER WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALLED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, SPECIFY THE CLASS AND THE NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE ON THE MERGER AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS. ATTACH ADDITIONAL PAGES, IF NECESSARY.                           |  |   |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| <table border="1"> <thead> <tr> <th colspan="3">SURVIVING ENTITY</th> <th colspan="3">DISAPPEARING ENTITY</th> </tr> <tr> <th>CLASS AND NUMBER</th> <th>AND</th> <th>PERCENTAGE VOTE REQUIRED</th> <th>CLASS AND NUMBER</th> <th>AND</th> <th>PERCENTAGE VOTE REQUIRED</th> </tr> </thead> <tbody> <tr> <td>Sole Member</td> <td></td> <td>100%</td> <td>Sole Member</td> <td></td> <td>100%</td> </tr> </tbody> </table> |  | SURVIVING ENTITY  |                               |     | DISAPPEARING ENTITY      |  |  | CLASS AND NUMBER | AND | PERCENTAGE VOTE REQUIRED | CLASS AND NUMBER | AND | PERCENTAGE VOTE REQUIRED | Sole Member |  | 100% | Sole Member |  | 100% |  |  |
| SURVIVING ENTITY  |  |   | DISAPPEARING ENTITY           |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| CLASS AND NUMBER  | AND  | PERCENTAGE VOTE REQUIRED  | CLASS AND NUMBER              | AND | PERCENTAGE VOTE REQUIRED |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| Sole Member   |  | 100%  | Sole Member                   |     | 100%                     |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 10. IF EQUITY SECURITIES OF A PARENT PARTY ARE TO BE ISSUED IN THE MERGER, CHECK THE APPLICABLE STATEMENT.<br><input type="checkbox"/> No vote of the shareholders of the parent party was required. <input type="checkbox"/> The required vote of the shareholders of the parent party was obtained.   |  |   |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 11. IF THE SURVIVING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, PROVIDE THE REQUISITE CHANGES (IF ANY) TO THE INFORMATION SET FORTH IN THE SURVIVING ENTITY'S ARTICLES OF ORGANIZATION, CERTIFICATE OF LIMITED PARTNERSHIP OR STATEMENT OF PARTNERSHIP AUTHORITY RESULTING FROM THE MERGER. ATTACH ADDITIONAL PAGES, IF NECESSARY.<br>None                                      |  |   |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 12. IF A DISAPPEARING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, AND THE SURVIVING ENTITY IS NOT A DOMESTIC ENTITY OF THE SAME TYPE, ENTER THE PRINCIPAL ADDRESS OF THE SURVIVING ENTITY.<br>PRINCIPAL ADDRESS OF SURVIVING ENTITY: N/A<br>CITY AND STATE: _____<br>ZIP CODE: _____   |  |   |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 13. OTHER INFORMATION REQUIRED TO BE STATED IN THE CERTIFICATE OF MERGER BY THE LAWS UNDER WHICH EACH CONSTITUENT OTHER BUSINESS ENTITY IS ORGANIZED. ATTACH ADDITIONAL PAGES, IF NECESSARY.<br>None  |  |   |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 14. STATUTORY OR OTHER BASIS UNDER WHICH A FOREIGN OTHER BUSINESS ENTITY IS AUTHORIZED TO EFFECT THE MERGER.<br>None  |  | 15. FUTURE EFFECTIVE DATE, IF ANY<br>07 - 31 - 08<br>(Month) (Day) (Year) |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 16. ADDITIONAL INFORMATION SET FORTH ON ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE PART OF THIS CERTIFICATE.   |  |   |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| 17. 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 FOR THE SURVIVING ENTITY _____   |  | DATE _____  |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY _____   |  | DATE _____  |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY _____  |  | DATE _____  |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |
| SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY _____  |  | DATE _____  |                               |     |                          |  |  |                  |     |                          |                  |     |                          |             |  |      |             |  |      |  |  |

For an entity that is a business trust, real estate investment trust or an unincorporated association, set forth the provision of law or other basis for the authority of the person signing: \_\_\_\_\_

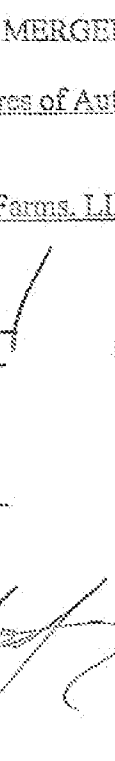
FORM OBE MERGER-1 ATTACHMENT

Signatures of Authorized Persons

Surviving Entity – Jackson Family Farms, LLC

  
\_\_\_\_\_  
Jess S. Jackson, Manager 5/30/2008

  
\_\_\_\_\_  
Barbara R. Banke, Manager 6/30/2008

  
\_\_\_\_\_  
Donald M. Hartford, Jr., Manager 6/30/2008

Disappearing Entity – White Rocket Wine Company, LLC

  
\_\_\_\_\_  
Jess S. Jackson, Manager 6/30/2008

  
\_\_\_\_\_  
Barbara R. Banke, Manager 6/30/2008

  
\_\_\_\_\_  
Donald M. Hartford, Jr., Manager 6/30/2008

