

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
EJ Wisch, LLC		11/05/2008	CORPORATION: CALIFORNIA
RECEIVING PARTY DATA			
Name:	Fashionology LLC		
Street Address:	668 Chautauqua Boulevard		
City:	Pacific Palisades		
State/Country:	CALIFORNIA		
Postal Code:	90272		
Entity Type:	CORPORATION: CALIFORNIA		
PROPERTY NUMBERS Total: 4			
Property Type	Number	Word Mark	
Serial Number:	77259168	FASHIONOLOGY LA	
Serial Number:	77259206	FASHIONOLOGY LA	
Serial Number:	77427704	FASHIONOLOGY	
Serial Number:	77427702	FASHIONOLOGY	
CORRESPONDENCE DATA			
Fax Number:	(617)526-5000		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	617-526-6448		
Email:	janey.davidson@wilmerhale.com		
Correspondent Name:	Michael J. Bevilacqua, Esquire		
Address Line 1:	Wilmer Cutler Pickering Hale and DorrLLP		
Address Line 2:	60 State Street		
Address Line 4:	Boston, MASSACHUSETTS 02109		
ATTORNEY DOCKET NUMBER:	2201914121		
NAME OF SUBMITTER:	Michael J. Bevilacqua		

CH \$115.00 77259168

Signature:

/michael j. bevilacqua/

Date:

12/29/2008

Total Attachments: 2

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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 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

NOV 05 2008

Handwritten signature of Debra Bowen in cursive script.

DEBRA BOWEN
Secretary of State



**State of California
Secretary of State**

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

**LIMITED LIABILITY COMPANY
RESTATED ARTICLES OF ORGANIZATION**

NOV 05 2008

A \$30.00 filing fee must accompany this form.

IMPORTANT - Read instructions before completing this form.

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1. SECRETARY OF STATE FILE NUMBER 200618810096		2. NAME OF LIMITED LIABILITY COMPANY: EJ Wisch, LLC	
3. NAME OF LIMITED LIABILITY COMPANY IF DIFFERENT FROM ITEM 2. (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY" OR "LTD. LIABILITY CO." OR THE ABBREVIATIONS "LLC OR L.L.C.") Fashionology LLC			
4. FUTURE EFFECTIVE DATE, IF ANY: MONTH: DAY: YEAR:			
5. 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.			
6. CHECK THE APPROPRIATE PROVISION BELOW AND NAME THE AGENT FOR SERVICE OF PROCESS <input type="checkbox"/> AN INDIVIDUAL RESIDING IN CALIFORNIA. PROCEED TO ITEM 7 <input checked="" type="checkbox"/> A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO SECTION 1505. PROCEED TO ITEM 8. AGENT'S NAME: <u>C T Corporation System</u>			
7. CALIFORNIA ADDRESS OF THE AGENT FOR SERVICE OF PROCESS. COMPLETE ONLY IF AN INDIVIDUAL. ADDRESS CITY STATE: CA ZIP CODE:			
8. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY: (CHECK ONE) <input type="checkbox"/> ONE MANAGER <input checked="" type="checkbox"/> MORE THAN ONE MANAGER <input type="checkbox"/> ALL LIMITED LIABILITY COMPANY MEMBER(S)			
9. 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 THE LATEST DATE ON WHICH THE LIMITED LIABILITY IS TO DISSOLVE.			
10. TOTAL NUMBER OF PAGES ATTACHED, IF ANY:			
11. I/WE HEREBY DECLARED THAT I/AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. <u>Elyse Wiatt</u> November 4, 2008 SIGNATURE OF AUTHORIZED PERSON DATE <u>Elizabeth Wiatt, Manager</u> TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON			
12. RETURN TO: NAME <u>Tim Young</u> FIRM <u>Wilmer Cutler Pickering Hale and Dorr LLP</u> ADDRESS <u>1117 S. California Avenue</u> CITY/STATE <u>Palo Alto, CA</u> ZIP CODE <u>94304</u>			

