

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
Footprint Retail Services		02/10/2004	LIMITED LIABILITY COMPANY: DELAWARE
RECEIVING PARTY DATA			
Name:	HGDS Acquisition, LLC		
Street Address:	2200 Western Court		
Internal Address:	Suite 150		
City:	Lisle		
State/Country:	ILLINOIS		
Postal Code:	60532		
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	3383854	FOOTPRINT	
Registration Number:	3390655	FF	
Registration Number:	3474515	FF FOOTPRINT RETAIL SERVICES	
CORRESPONDENCE DATA			
Fax Number:	(312)827-8185		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Email:	chicago.trademarks@klgates.com		
Correspondent Name:	Carol A. Genis		
Address Line 1:	P.O. Box 1135		
Address Line 4:	Chicago, ILLINOIS 60690-1135		
ATTORNEY DOCKET NUMBER:	3716342-00009		
NAME OF SUBMITTER:	Carol A. Genis		

CH \$90.00 3383854

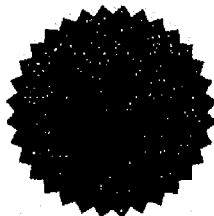
Signature:	/cag/
Date:	11/12/2009
Total Attachments: 6 source=HGDS certificate of formation#page1.tif source=HGDS certificate of formation#page2.tif source=HGDS certificate of formation#page3.tif source=HGDS certificate of formation#page4.tif source=HGDS certificate of formation#page5.tif source=HGDS certificate of formation#page6.tif	

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "HGDS ACQUISITION LLC", FILED IN THIS OFFICE ON THE TENTH DAY OF FEBRUARY, A.D. 2004, AT 1:48 O'CLOCK P.M.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3763041 8100

AUTHENTICATION: 2922506

040091859

DATE: 02-10-04

TRADEMARK
REEL: 004095 FRAME: 0186

CERTIFICATE OF FORMATION

OF

HGDS ACQUISITION LLC

This Certificate of Formation of HGDS Acquisition LLC dated February 10, 2004, is being duly executed and filed by Merrick D. Hatcher, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. § 18-101, et seq.)

FIRST. The name of the limited liability company formed hereby is HGDS Acquisition LLC.

SECOND. The address of the registered office of the limited liability company in the State of Delaware is c/o Corporation Service Company, 2711 Centerville Road, Suite 400, Wilmington, County of New Castle, Delaware 19808.

THIRD. The name and address of the registered agent for service of process on the limited liability company in the State of Delaware is c/o Corporation Service Company, 2711 Centerville Road, Suite 400, Wilmington, County of New Castle, Delaware 19808.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the date first above written.

/s/ Merrick D. Hatcher

Merrick D. Hatcher
Authorized Person



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

FEBRUARY 13, 2004

0111535-9

LAWRENCE C. EPPLEY
70 WEST MADISON ST., STE. 3300
CHICAGO, IL 60602-0000

RE HGDS ACQUISITION LLC

DEAR SIR OR MADAM:

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND AN APPROVED APPLICATION OF ADMISSION.

THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SINCERELY YOURS,

A handwritten signature in cursive script that reads "Jesse White".

JESSE WHITE
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY COMPANY DIVISION
TELEPHONE (217)524-8008

JW:LLC

Form **LLC-45.5**
December 2003

**Illinois
Limited Liability Company Act**

This space for use by
Secretary of State

Jesse White
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 351, Howlett Building
Springfield, IL 62756
http://cyberdriveillinois.com

Application for Admission to Transact Business

Submit in Duplicate

Must be typewritten

This space for use by Secretary of State

Date 2-13-2004
Assigned File # 0111-535-9
Filing Fee \$500
Penalty \$ -
Approved: [Signature] \$ 500

FILED

FEB 13 2004

LIMITED LIABILITY CO. DIV.
JESSE WHITE
SECRETARY OF STATE

- Limited Liability Company name: HGDS Acquisition LLC
(Must comply with Section 1-10 of ILLCA or article 2 below applies.)
- The assumed name, other than the true company name, under which the LLC proposes to transact business in Illinois is: _____
(If applicable, a form LLC-1.20, Application to Adopt an Assumed Name, is required to be completed and attached to this application.)
- Jurisdiction of Organization: Delaware
- Date of Organization: February 10, 2004
- Period of Duration: perpetual
- The address, including county, of the office required to be maintained in the jurisdiction of its organization, or if not required, of the principal place of business (Post office box alone and c/o are unacceptable):
(See #14 on back)
2200 Western Court, Suite 150

<u>(Number)</u>	<u>(Street)</u>	<u>(Suite)</u>
<u>Lisle, Illinois</u>	<u>60532</u>	<u>DuPage</u>
<u>(City/State)</u>	<u>(ZIP Code)</u>	<u>(County)</u>
- Registered agent: Lawrence C. Eppley

<u>(First Name)</u>	<u>(Middle Name)</u>	<u>(Last Name)</u>
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Registered Office: 70 West Madison Street, Suite 3300

<u>(Number)</u>	<u>(Street)</u>	<u>(Suite #)</u>
<u>(P.O. Box or c/o Chicago</u>	<u>Cook</u>	<u>Illinois 60602</u>
<u>are unacceptable) (City)</u>	<u>(County)</u>	<u>(ZIP Code)</u>
- The date on which this foreign LLC first did business in Illinois: upon acceptance of application

LLC-45.5

9. The purpose or purposes for which the company is organized and proposes to conduct in this State: Include the business code # (IRS Form 1065).

The transaction of any or or lawful business for which limited liability companies may be organized under the Delaware Limited Liability Act and permitted under the Illinois Limited Liability Act.

IRS Code: 488990 Other Support Activities for Transportation

10. The limited liability company is managed by:

- manager(s)
 vested in member(s)

11. The Illinois Secretary of State is hereby appointed the agent of the limited liability company for service of process under the circumstances set forth in a subsection (b) of Section 1-50 of the ILLCA.

12. This application is accompanied by a certificate of good standing or existence, as well as a copy of the articles of organization, as amended, duly authenticated within the last thirty (30) days, by the officer of the state or country wherein the LLC is formed.

13. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date must also be submitted.

14. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated February 12, 2004
(Month/Day) (Year)



(Signature)

(Signature must comply with Section 5-45 of ILLCA)

William McKenna, Manager

(Type or print name and title)

*(if applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

Please refer to Sections 178.20(d) of the Administrative Rules

LLC-17.5

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See specific instructions on page 2.

Name (as shown on your income tax return) HGDS ACQUISITION, LLC.	
Business name, if different from above FOOTPRINT RETAIL SERVICES	
Check appropriate box: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ P..... <input type="checkbox"/> Other (see instructions) ▶	<input type="checkbox"/> Exempt payee
Address (number, street, and apt. or suite no.) 2200 WESTERN COURT, SUITE 150	Requester's name and address (optional)
City, state, and ZIP code LISLE IL 60532	
List account number(s) here (optional)	
Taxpayer Identification Number (TIN)	