

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
National Bottle Company LLC		12/08/2008	LIMITED LIABILITY COMPANY: OHIO
RECEIVING PARTY DATA			
Name:	Universal Nolin Company LLC		
Street Address:	87 East Washington Street		
City:	Chagrin Falls		
State/Country:	OHIO		
Postal Code:	44022		
Entity Type:	LIMITED LIABILITY COMPANY: OHIO		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	3304189	MIRACOOOL	
Registration Number:	2160895	THE BREEZE	
Registration Number:	0843195	MARKETEER	
CORRESPONDENCE DATA			
Fax Number:	(415)393-9887		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	415.954.0200		
Email:	trademark@ssd.com		
Correspondent Name:	Francesca E. Crisera, Esq.		
Address Line 1:	Squire, Sanders & Dempsey L.L.P.		
Address Line 2:	One Maritime Plaza, Suite 300		
Address Line 4:	San Francisco, CALIFORNIA 94111-3492		
ATTORNEY DOCKET NUMBER:	104038.00001		
NAME OF SUBMITTER:	Francesca E. Crisera		

CH \$90.00 3304189

900148636

**TRADEMARK
 REEL: 004104 FRAME: 0135**

Signature:	/francesca crisera/
Date:	11/25/2009
Total Attachments: 3 source=Universal Nolin_Amended Articles#page1.tif source=Universal Nolin_Amended Articles#page2.tif source=Universal Nolin_Amended Articles#page3.tif	

200834401898

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/08	200834401898	AMEND/ARTICLES- ORGANIZATION/DOM. LLC (LAM)	50.00	100.00	.00	.00	.00

Receipt

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

SQUIRE, SANDERS & DEMPSEY, L.L.P.
41 SOUTH HIGH STREET, SUITE 1300
COLUMBUS, OH 43215

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Jennifer Brunner

1820196

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

UNIVERSAL NOLIN COMPANY LLC

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

Document(s):

AMEND/ARTICLES-ORGANIZATION/DOM. LLC

Document No(s):

200834401898



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 8th day of December, A.D. 2008.

Handwritten signature of Jennifer Brunner in cursive.

Ohio Secretary of State

**TRADEMARK
REEL: 004104 FRAME: 0137**



Prescribed by:

The Ohio Secretary of State
 Central Ohio: (614) 466-3910
 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite this Form: (Select One)	
Mail Form to one of the Following:	
<input checked="" type="checkbox"/> Expedite	PO Box 1390 Columbus, OH 43216
*** Requires an additional fee of \$100 ***	
<input type="checkbox"/> Non Expedite	PO Box 1329 Columbus, OH 43216

www.sos.state.oh.us

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

**Domestic Limited Liability Company Certificate of
 Amendment or Restatement
 Filing Fee \$50.00**

(CHECK ONLY ONE (1) BOX)

<p>(1) Domestic Limited Liability Company</p> <p><input checked="" type="checkbox"/> Amendment (129-LAM)</p> <p><u>11/24/2008</u> Date of Formation</p>	<p>(2) Domestic Limited Liability Company</p> <p><input type="checkbox"/> Restatement (142-LRA)</p> <p>_____ Date of Formation</p>
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The undersigned authorized representative of:

National Bottle Company LLC

Name of limited liability company

1820196

Registration number

If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

The name of said limited liability company shall be:

Universal Nolin Company LLC

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd." or "ltd"

This limited liability company shall exist for a period of:

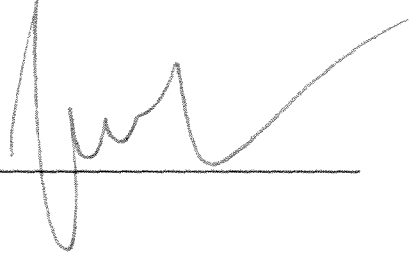
Period of Existence

Purpose

Check here if additional provisions are attached

REQUIRED
Must be **(signed)** by a
member, manager or
other representative.

Signature



12/18/09
Date

James S. Kaufman, Member
Print Name

Signature

Date

Print Name

Signature

Date

Print Name