

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Certificate of Conversion		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Rajan, Inc.		12/31/2007	CORPORATION: OHIO
RECEIVING PARTY DATA			
Name:	Rajan, LLC		
Street Address:	495 South High Street		
Internal Address:	Suite 50		
City:	Columbus		
State/Country:	OHIO		
Postal Code:	43215		
Entity Type:	LIMITED LIABILITY COMPANY: OHIO		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	2885790	FOUNDATIONS4ENERGY	
Registration Number:	2894610	COMFORT FROM THE GROUND UP	
CORRESPONDENCE DATA			
Fax Number:	(216)241-0816		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	216-622-8200		
Email:	ipdocket@calfee.com		
Correspondent Name:	Carol A. Costanza		
Address Line 1:	c/o Calfee, Halter & Griswold LLP		
Address Line 2:	800 Superior Avenue, Suite 1400		
Address Line 4:	Cleveland, OHIO 44114-2688		
ATTORNEY DOCKET NUMBER:	28450/04044		
NAME OF SUBMITTER:	Carol A. Costanza		

CH \$65.00 2885790

900163010

**TRADEMARK
 REEL: 004212 FRAME: 0472**

Signature:	/cac/
Date:	05/25/2010
Total Attachments: 6 source=00824963#page1.tif source=00824963#page2.tif source=00824963#page3.tif source=00824963#page4.tif source=00824963#page5.tif source=00824963#page6.tif	



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/28/2007	200736101126	CONVERSION WITHIN SOS RECORDS (CVS)	125.00	.00	.00	.00	.00

Receipt

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

KEGLER, BROWN, HILL & RITTER
65 E. STATE ST., SUITE 1800
DEBRA G. APPEL
COLUMBUS, OH 43215

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Jennifer Brunner

771263

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

RAJAN, LLC

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

Document(s)

CONVERSION WITHIN SOS RECORDS
(CHANGE BUSINESS TYPE DOM. LIMITED LIABILITY CO.)

Document No(s):

200736101126



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 31st day of December,
A.D. 2007.

Ohio Secretary of State



Prescribed by:
The Ohio Secretary of State

Central Ohio: (614) 466-3910

Toll Free: 1-877-SOS-FILE (1-877-767-3453)

<input type="radio"/> Expedite	P.O. Box 1390 Columbus, OH 43216
*** Requires an additional \$100.00 fee ***	
<input checked="" type="radio"/> Non Expedite	P.O. Box 1329 Columbus, OH 43216

CERTIFICATE OF CONVERSION
FOR ENTITIES CONVERTING WITHIN OR OFF THE RECORDS OF THE OHIO SECRETARY OF STATE
Filing Fee \$125.00

Pursuant to: 1701.811, 1705.381, 1775.55, and 1782.4310 of the Revised Code for the State of Ohio, (as applicable), the undersigned converting business entity does hereby submit these Articles of Conversion for the purpose of converting to a different business entity.

Box 1

Converting Within The Records of the Ohio Secretary of State

Box 2

Converting Off The Records of the Ohio Secretary of State
187-VXX

Complete the information in this section if Box 1 or Box 2 is checked above

The name of the converting business entity is RaJan, Inc.
existing under the laws of the state or country of Ohio

The converting business entity is (Check One)

- | | |
|--|---|
| <input checked="" type="checkbox"/> Domestic Corporation | <input type="checkbox"/> Domestic Limited Liability Co. |
| <input type="checkbox"/> Domestic Partnerships | <input type="checkbox"/> Domestic Limited Partnership |
| <input type="checkbox"/> Foreign Corporation | <input type="checkbox"/> Domestic Limited Liability Partnership |
| <input type="checkbox"/> Foreign Limited Liability Co. | <input type="checkbox"/> Foreign Limited Partnership |
| <input type="checkbox"/> Foreign Limited Liability Partnership | <input type="checkbox"/> Business Trust |

The converting entity hereby states they have complied with all laws under the state in which it exists. Furthermore, said law permits for said conversion.

The resulting business entity is (Check One)

- | | |
|--|--|
| <input type="checkbox"/> Domestic Corporation | <input checked="" type="checkbox"/> Domestic Limited Liability Co. |
| <input type="checkbox"/> Domestic Partnerships | <input type="checkbox"/> Domestic Limited Partnership |
| <input type="checkbox"/> Foreign Corporation | <input type="checkbox"/> Domestic Limited Liability Partnership |
| <input type="checkbox"/> Foreign Limited Liability Co. | <input type="checkbox"/> Foreign Limited Partnership |
| <input type="checkbox"/> Foreign Limited Liability Partnership | <input type="checkbox"/> Business Trust |

The name of the resulting business entity is RaJan, LLC
existing under the laws of state or country of Ohio

The effective date of conversion will be upon filing, unless a date is specified 31-Dec-07
(See Instructions) *Date*

The name and address of the person or entity that will provide a copy of the declaration of conversion upon written request:

Shelley A. McBride 495 South High Street, Suite 50
Name & Address

Columbus OH 43215
City State Zip Code

RECEIVED
SECRETARY OF STATE
2007 DEC 20 PM 1:36
CLIENT SERVICE CENTER

Required information that must accompany conversion certificate if Box 1 is checked.

If the conversion creates a new domestic corporation, limited liability company, limited partnership or a partnership having limited liability, attach the form prescribed by the secretary of state for the *specific entity type* to the certificate of conversion. (See *Instructions*)

Required information that must accompany conversion certificate if Box 2 is checked.

If the converting entity is a domestic or foreign entity that will not be licensed in this state, provide the name and address of the statutory agent upon whom any process, notice or demand may be served:

Name of Statutory Agent

Street Address

City

Ohio

Zip Code

If the converting entity is a domestic or foreign corporation licensed to transact business in Ohio, and converting off the records, the certificate of conversion must be accompanied by the affidavits herein attached. (See *Instructions*)

IN WITNESS WHEREOF, the declaration of conversion is authorized on behalf of the converting entity and that each person signing the certificate of conversion is authorized to do so.

Must be signed by:
An authorized representative(s)



Authorized Representative

Frank M. Schossler, CFO
Title

Authorized Representative

Title

Authorized Representative

Title



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

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 Return Address:	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input checked="" type="radio"/> No	PO Box 670 Columbus, OH 43216

**ORGANIZATION / REGISTRATION OF
LIMITED LIABILITY COMPANY**
(Domestic or Foreign)
Filing Fee \$125.00

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

<input checked="" type="checkbox"/> (1) Articles of Organization for Domestic Limited Liability Company (115-LCA) ORC 1705	<input type="checkbox"/> (2) Application for Registration of Foreign Limited Liability Company (106-LFA) ORC 1705
_____	_____
(Date of Formation)	(State)

Complete the general information in this section for the box checked above.

Name RaJan, LLC

Check here if additional provisions are attached

* If box (1) is checked, name must include one of the following endings: limited liability company, limited, Ltd, L.t.d., LLC, L.L.C.

Complete the information in this section if box (1) is checked.

Effective Date (Optional) December 31, 2007 Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

This limited liability company shall exist for _____
(Optional) (Period of existence)

Purpose (Optional) _____

The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is

(Optional)
(Name) _____
(Street) _____
NOTE: P.O. Box Addresses are NOT acceptable.
(City) _____ (State) _____ (Zip Code) _____

Complete the information in this section if box (1) is checked Cont.

ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member, manager or representative of

RaJan, LLC
(name of limited liability company)

hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is:

William W. Jenkins
(Name of Agent)

495 South High Street, Suite 50
(Street) NOTE: P.O. Box Addresses are NOT acceptable.

Columbus Ohio 43215
(City) (State) (Zip Code)

Must be authenticated by an authorized representative

William W Jenkins (handwritten signature)
Authorized Representative

12/13/07
Date

Authorized Representative

Date

ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

RaJan, LLC
(name of limited liability company)

hereby acknowledges and accepts the appointment of agent for said limited liability Company.

William W Jenkins (handwritten signature)
(Agent's signature)

PLEASE SIGN PAGE (3) AND SUBMIT COMPLETED DOCUMENT

Complete the information in this section if box (2) is checked.

The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is

 (Name)

 (Street) NOTE: P.O. Box Addresses are NOT acceptable.

 (City) (State) (Zip Code)

The name under which the foreign limited liability company desires to transact business in Ohio is

The limited liability company hereby appoints the following as its agent upon whom process against the limited liability company may be served in the state of Ohio. The name and complete address of the agent is

 (Name)

 (Street) NOTE: P.O. Box Addresses are NOT acceptable.

 (City) Ohio (State) (Zip Code)

The limited liability company irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the OHIO SECRETARY OF STATE if:

- a. the agent cannot be found, or
- b. the limited liability company fails to designate another agent when required to do so, or
- c. the limited liability company's registration to do business in Ohio expires or is cancelled.

REQUIRED

Must be authenticated (signed) by an authorized representative (See Instructions)

<i>William W Jenkins</i>	12/13/07
Authorized Representative	Date

William W. Jenkins, Authorized Representative
(Print Name)

Authorized Representative	Date

(Print Name)