

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
Consolidated Biscuit Co.		04/30/2010	CORPORATION: OHIO
RECEIVING PARTY DATA			
Name:	Patjim Holdings Company		
Street Address:	136 N. Huron Street		
City:	Toledo		
State/Country:	OHIO		
Postal Code:	43604		
Entity Type:	CORPORATION: OHIO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	0691791	BUCKEYE SPARKLING DRY	
CORRESPONDENCE DATA			
Fax Number:	(419)243-8502		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	419 243-1294		
Email:	essp@essp-law.com		
Correspondent Name:	Charles R. Schaub		
Address Line 1:	One SeaGate, Suite 1980, P.O. Box 916		
Address Line 4:	Toledo, OHIO 43697-0916		
ATTORNEY DOCKET NUMBER:	A-12019		
NAME OF SUBMITTER:	Charles R. Schaub		
Signature:	/Charles R. Schaub/		
Date:	10/21/2010		

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Total Attachments: 10

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Form 551 Prescribed by the Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: (877) 6DC-FILE (737-3453)
www.sos.state.oh.us
Bossery@sos.state.oh.us

Expand this form: (select one)
Mail form to one of the following:
 Domestic PO Box 1328
Columbus, OH 43216
Residence an additional fee of \$100 ---
 Non Domestic PO Box 1328
Columbus, OH 43216

CERTIFICATE OF MERGER
Filing Fee \$125
(184-MER)

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan associations, limited liability companies, partnerships, limited partnerships and/or limited liability partnerships, desiring to effect a merger, set forth the following facts

I. **SURVIVING ENTITY**

A. Name of the entity surviving the merger Consolidated Biscuit Co.

B. Name Change: As a result of this merger, the name of the surviving entity has been changed to the following

Patjm Holdings Company
(Complete only if name of surviving entity is changing through the merger)

C. The surviving entity is a (Please check the appropriate box and fill in the appropriate blanks)

Domestic (Ohio) For-Profit Corporation, charter number 454149

Domestic (Ohio) Nonprofit Corporation, charter number _____

Foreign (Non-Ohio) For-Profit Corporation incorporated under the laws of the jurisdiction of _____ and licensed to transact business in the state of Ohio under license number _____

Foreign (Non-Ohio) For-Profit Corporation incorporated under the laws of the jurisdiction of _____ and NOT licensed to transact business in the state of Ohio

Foreign (Non-Ohio) Nonprofit Corporation under the laws of the jurisdiction of _____ and licensed to transact business in the state of Ohio under license number _____

Foreign (Non-Ohio) Nonprofit Corporation under the laws of the jurisdiction of _____ and NOT licensed to transact business in the state of Ohio

Domestic (Ohio) For-Profit Limited Liability Company, with registration number _____

Domestic (Ohio) Nonprofit Limited Liability Company, with registration number _____

Foreign (Non-Ohio) For-Profit Limited Liability Company organized under the laws of the jurisdiction of _____ registered to do business in the state of Ohio under registration number _____

Foreign (Non-Ohio) For-Profit Limited Liability Company organized under the laws of the jurisdiction of _____ and NOT registered to do business in the state of Ohio

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- Foreign (Non-Ohio) Nonprofit Limited Liability Company organized under the laws of the jurisdiction of _____ and registered to do business in the state of Ohio under registration number _____
- Foreign (Non-Ohio) Nonprofit Limited Liability Company organized under the laws of the jurisdiction of _____ and NOT registered to do business in the State of Ohio
- Partnership, registration number, if any, _____
- Partnership NOT registered with the state of Ohio _____
- Domestic (Ohio) Limited Partnership, with registration number _____
- Foreign (Non-Ohio) Limited Partnership organized under the laws of the jurisdiction of _____ and registered to do business in the state of Ohio under registration number _____
- Foreign (Non-Ohio) Limited Partnership organized under the laws of the jurisdiction of _____ and NOT registered to do business in the state of Ohio
- Domestic (Ohio) Limited Liability Partnership, with the registration number _____
- Foreign (Non-Ohio) Limited Liability Partnership organized under the laws of the jurisdiction of _____ and registered to do business in the state of Ohio under registration number _____
- Foreign (Non-Ohio) Limited Liability Partnership organized under the laws of the jurisdiction of _____ and NOT registered to do business in the state of Ohio

II. **CONSTITUENT ENTITY**
 Provide the name, charter/license/registration number, type of entity, jurisdiction of formation, for each entity merging out of existence. (If this is insufficient space to reflect all merging entities, please attach a separate sheet listing the additional merging entities)

Name	Charter, License, Registration, or Registration Number	Jurisdiction of Formation	Type of Entity
Consolidated	1525120	OH	LLC
Biscuit Leasing	_____	_____	_____
Co., LLC	_____	_____	_____
_____	_____	_____	_____

III. **MERGER AGREEMENT ON FILE**
 The name and mailing address of the person or entity from whom/which eligible persons may obtain a copy of the merger agreement upon written request:

<u>Henry N. Heuerman</u>	<u>c/o Eastman & Smith Ltd., P.O. Box 10032</u>
<small>Name</small>	<small>Mailing Address</small>
<u>Toledo</u>	<u>OH 43699-0032</u>
<small>City</small>	<small>State Zip Code</small>

IV. **EFFECTIVE DATE OF MERGER** April 30, 2010
 This merger is to be effective on _____ (The date specified must be on or after the date of the filing; the effective date of the merger cannot be earlier than the date of filing, if no date is specified, the date of filing will be the effective date of the merger).

V. **MERGER AUTHORIZED**
 Each constituent entity has complied with all of the laws under which it exists and the laws permit the merger. The agreement of merger is authorized on behalf of each constituent entity and each person who signed the certificate on behalf of each entity is authorized to do so.

VI. **STATEMENT OF MERGER**
 Upon filing this Certificate of Merger, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed surviving entity.

VII. **STATUTORY AGENT**
 If the surviving entity is a foreign entity NOT licensed to transact business in Ohio, OR if the surviving entity is a domestic corporation, limited liability company, or limited partnership entity updating its agent information, provide the name and address of statutory agent upon whom any process, notice or demand may be served.

 Name _____
 Mailing Address

 City _____ _____ _____
 Ohio State Zip Code

VIII. **ACCEPTANCE OF AGENT**
 If the new entity is a domestic corporation, domestic limited liability company, partnership or domestic limited partnership, then the agent must accept appointment.

The undersigned, named herein as the statutory agent upon whom service of process against any constituent entity or the surviving entity may be served, hereby acknowledges and accepts the appointment of statutory agent.

 Signature of Agent _____
 Date

If the agent is an individual using a P.O. Box, the agent must check this box to confirm that he or she is an Ohio resident

IX. **AMENDMENTS**
 In the case of a merger into a domestic corporation, limited liability company, or limited partnership, any amendments to the articles of incorporation, articles of organization, or certificate of limited partnership of the surviving domestic entity shall be filed with the certificate of merger.

Amendments are attached No Amendments

X. **REQUIREMENTS OF CORPORATIONS MERGING OUT OF EXISTENCE**
 If a domestic or foreign corporation licensed to transact business in Ohio is a constituent entity and the surviving or new entity resulting from the merger is not a domestic or foreign corporation that is to be licensed to transact business in Ohio, the certificate of merger must be accompanied by the affidavits, receipts, certificates, or other evidence required by division (H) of section 1701.85 and division (G) of section 1702.47 of the Revised Code with respect to each domestic corporation, and by the affidavits, receipts, certificates, or other evidence required by division (C) or (D) of section 1703.17 of the Revised Code with respect to each foreign constituent corporation licensed to transact business in Ohio.

XI QUALIFICATION OR LICENSURE OF FOREIGN SURVIVING ENTITY

A. The surviving foreign entity desires to transact business in Ohio as a foreign corporation, bank, savings bank, savings and loan, limited liability company, partnership, limited partnership, or limited liability partnership, and hereby appoints the following as its statutory agent upon whom process, notice or demand against the entity may be served in the state of Ohio.

Name _____ Mailing Address _____
City _____ Ohio _____ Zip Code _____
State _____

☐ If the agent is an individual using a P.O. Box, check the box to confirm that the agent is an Ohio resident.

The surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or limited liability partnership ("surviving entity") irrevocably consents to (1) service of process on the statutory agent listed above as long as authority of the agent continues, and (2) to service of process upon the Secretary of State of Ohio if the agent cannot be found. If the surviving entity fails to designate another agent, as required by Ohio law, the surviving entity's license or registration to do business in Ohio expires or is canceled.

B. The qualifying entity also states as follows: (Complete only if applicable)

1. Foreign Qualifying Corporation (Section 1703.04)

(If the qualifying entity is a foreign corporation, the following information must be completed.)

(a) Name of the corporation in its jurisdiction of formation

(b) If the corporate name is not available, the trade name under which it will do business in Ohio

(c) Location and complete address of its principal office

Mailing Address _____
City _____ State _____ Zip Code _____

(d) Name of the county in which its principal office in Ohio, if any, is to be located

(e) A brief summary of the corporate purpose to be exercised within Ohio

(f) To procure a license to transact business in Ohio, a foreign corporation for-profit must file with the secretary of state: certificate of good standing or subsistence, dated not earlier than 90 days prior to the filing of the application, under the seal of the secretary of state, or other proper official, of the jurisdiction under the laws of which said corporation was incorporated, setting forth: (1) the exact corporate title; (2) the date of incorporation; and (3) the fact that the corporation is in good standing or is a subsisting corporation.

2 Foreign Notice (Section 1703.031)

(If the qualifying entity is a foreign bank, savings bank, or savings and loan, the following information must be completed.)

(a) Name of the Foreign nationally/federally chartered bank, savings bank, or savings and loan association

(b) Any trade name(s) under which the corporation will conduct business in Ohio

(c) Location of the corporation's main office (Non-Ohio)

_____ Mailing Address

_____ City _____ State _____ Zip Code

(d) Principal office location in Ohio

_____ Mailing Address

_____ City _____ Ohio _____ State _____ Zip Code

(If there will not be an office in Ohio, please state "None" on the form)

(e) The corporation will exercise the following purpose(s) in Ohio

3. Foreign Qualifying Limited Liability Company (Section 1705.54)

(If the qualifying entity is a foreign limited liability company, the following information must be completed.)

(a) Name of the For-Profit or Nonprofit limited liability company in its jurisdiction of formation

(b) Name under which the limited liability company desires to transact business in Ohio (if different from its name in its jurisdiction of formation)

(c) The limited liability company was formed on _____

under the laws of the jurisdiction of _____

Date

Jurisdiction

(d) Address to which interested persons may direct requests for copies of the articles of organization, operating agreement, bylaws, or other charter documents of the company

Mailing Address _____
City _____ State _____ Zip Code _____

4. Foreign Qualifying Limited Partnership under section 1782.49
(If the qualifying entity is a foreign limited partnership, the following information must be completed.)

(a) Name of the limited partnership _____

(b) The limited partnership was formed on _____
Date

Under the laws of the jurisdiction of _____
Jurisdiction

(c) Address of the office of the limited partnership in its jurisdiction of formation

Mailing Address _____
City _____ State _____ Zip Code _____

(d) Address of the limited partnership's principal office

Mailing Address _____
City _____ State _____ Zip Code _____

(e) The names and business or residence addresses of the general partners of the partnership are as follows:

Name _____ Mailing Address _____
Name _____ Mailing Address _____
Name _____ Mailing Address _____
Name _____ Mailing Address _____

(Please attach a additional separate sheet(s) listing other general partners and their addresses as needed)

- (f) The address of the office where a list of the names and business or residence addresses of the limited partners and their respective capital contributions is to be maintained

Mailing Address _____

City _____ State _____ Zip Code _____

The limited partnership hereby certifies that it shall maintain such records until the registration of the limited partnership in Ohio is canceled or withdrawn.

5. Foreign Qualifying Limited Liability Partnership (Section 1776.86) (if the qualifying entity is a foreign limited liability partnership, the following information must be completed.)

- (a) Name of the partnership

Name must include one of the following phrases or abbreviations: "registered limited liability partnership," "limited liability partnership," "R.L.L.P.," "LLP," "RLLP," or "LLP."

- (b) The partnership was formed under the laws of the jurisdiction of _____

- (c) Address of the partnership's chief executive office

Mailing Address _____

City _____ State _____ Zip Code _____

- (d) If the chief executive office is not in Ohio, the address of any office of the partnership in Ohio, if one exists

Mailing Address _____

City _____ Ohio State _____ Zip Code _____

- (e) Foreign limited liability partnership must attach evidence of existence in its jurisdiction of formation (origin).

(Proceed to page 8 for signatures of authorized officers, partners and representatives.)

The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below

Consolidated Biscuit Co.

Exact name of entity _____

By: James M. Cappell _____

Signature _____

Its: _____

Title President _____

Date: April 30, 2010 _____

Consolidated Biscuit Leasing Co., LLC

Exact name of entity _____

By: James M. Cappell _____

Signature _____

Its: _____

Title President _____

Date: April 30, 2010 _____

Exact name of entity _____

By: _____

Signature _____

Its: _____

Title _____

Date: _____

Exact name of entity _____

By: _____

Signature _____

Its: _____

Title _____

Date: _____

Exact name of entity _____

By: _____

Signature _____

Its: _____

Title _____

Date: _____

An authorized representative of each constituent corporation, partnership, or entity must sign the merger certificate (ORC 1701.81(A), 1702.43 (A), 1705.38(A), 1776.70(A), 1782.433(A)).



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

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

Expedite this Form: (Select One)	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 <small>*** Requires an additional fee of \$100 ***</small>
<input checked="" type="radio"/> No	PO Box 1329 Columbus, OH 43216

**Certificate of Amendment by
 Shareholders or Members
 (Domestic)
 Filing Fee \$50.00**

(CHECK ONLY ONE (1) BOX)

(1) Domestic for Profit		(2) Domestic Nonprofit	
<input type="checkbox"/> Amended (122-AMAP)	<input checked="" type="checkbox"/> Amendment (125-AMDS)	<input type="checkbox"/> Amended (126-AMAN)	<input checked="" type="checkbox"/> Amendment (128-AMD)

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

Name of Corporation	Consolidated Biscuit Co.	
Charter Number	454149	
Name of Officer	James M. Appold	
Title	President	
<input type="checkbox"/> Please check if additional provisions attached.		
The above named Ohio corporation, does hereby certify that:		
<input type="checkbox"/> A meeting of the	<input type="checkbox"/> shareholders	<input type="checkbox"/> directors (<i>nonprofit only</i>)
<input checked="" type="checkbox"/> members was duly called and held on	_____	
	(Date)	
at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise _____ % as the voting power of the corporation.		
<input checked="" type="checkbox"/> In a writing signed by all of the	<input checked="" type="checkbox"/> shareholders	<input type="checkbox"/> directors (<i>nonprofit amended articles only</i>)
<input type="checkbox"/> members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.		

Clause applies if amended box is checked.

Resolved, that the following amended articles of Incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.
If an amendment box is checked, complete the areas that apply.

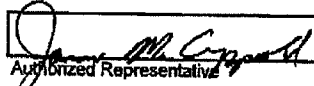
FIRST: The name of the corporation is: Patjim Holdings Company

SECOND: The place in the State of Ohio where its principal office is located is in the City of:
Toledo Lucas
(city, village or township) (county)

THIRD: The purposes of the corporation are as follows:

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
(Does not apply to box (2))

REQUIRED
Must be authenticated
(signed) by an authorized
representative
(See instructions)


Authorized Representative
James M. Appold, President
(Print Name)

April 30, 2010
Date

Authorized Representative
(Print Name)

Date