

Form PTO-1594 (Rev. 01-09)
OMB Collection 0551-0027 (exp. 02/28/2009)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies):

Buzz Off Insect Shield, LLC

- Individual(s) Association
 General Partnership Limited Partnership
 Corporation- State: _____
 Other Limited Liability Company

Citizenship (see guidelines) NC

Additional names of conveying parties attached? Yes No

3. Nature of conveyance /Execution Date(s) :

Execution Date(s) 10/18/2010

- Assignment Merger
 Security Agreement Change of Name
 Other Nu 1c Pro Tunc effective 03/19/2009

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes

No

Name: Insect Shield, LLC

Internal

Address: _____

Street Address: 814 W. Market Street

City: Greensboro

State: NC

Country: US Zip: 27401

- Association Citizenship _____
 General Partnership Citizenship _____
 Limited Partnership Citizenship _____
 Corporation Citizenship _____

Other Lmt'd Liability Co Citizenship NC

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

3587498; 3154661

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

3587498 for Insect Shield registered March 10, 2009; 3154661 for Insect Shield registered October 10, 2006

5. Name & address of party to whom correspondence concerning document should be mailed:

Name: Donna Cottelli

Internal Address: MacCord Mason PLLC

Street Address: P.O. Box 2974

City: Greensboro

State: NC Zip: 27402

Phone Number: 336-273-4422

Fax Number: 336-271-2830

Email Address: dcottelli@maccordmason.com

6. Total number of applications and registrations involved:

2

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 65

- Authorized to be charged to deposit account
 Enclosed

8. Payment Information:

Deposit Account Number 501923

Authorized User Name Donna Cottelli

9. Signature:

Donna Cottelli
Signature

October 26, 2010

Date

Donna Cottelli

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 7

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

USPTO

10/26/2010 7:59:55 AM

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ASSIGNMENT

This Agreement is effective as of March 19, 2009.

WHEREAS, **Buzz Off Insect Shield, LLC**, a North Carolina limited liability company (hereinafter Assignor) has adopted, used and is the owner of the trademarks **INSECT SHIELD** for goods in class 24, Registration No. 3587498 issued March 10, 2009 and **INSECT SHIELD** for goods in classes 18, 20, 22 and 25, Registration No. 3154661 issued October 10, 2006; both being registered in the United States Patent and Trademark Office; and

WHEREAS, **Insect Shield, LLC**, a North Carolina limited liability company (hereinafter Assignee) is desirous of acquiring said trademarks and the registrations thereof;

THEREFORE as of March 19, 2009, in consideration of and in exchange for the sum of Ten Dollars (\$10.00) and other good and valuable consideration, receipt of which is hereby acknowledged, said Assignor has assigned unto said Assignee all rights, title, and interest in and to the trademarks and the said registrations, together with the good will of the business symbolized by the trademarks.

This confirmation of Assignment is executed at Greensboro, North Carolina, this 18th day of October, 2010.

Buzz Off Insect Shield, LLC

By: _____

Haynes Griffin, Manager

Witness: _____

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