

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	MERGER		
EFFECTIVE DATE:	09/30/2010		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Aimbridge Indirect Lending, LLC		09/02/2010	LIMITED LIABILITY COMPANY: COLORADO
RECEIVING PARTY DATA			
Name:	Cribis Corporation		
Street Address:	3505 East Frontage Road		
Internal Address:	Suite 175		
City:	Tampa		
State/Country:	FLORIDA		
Postal Code:	33607-1762		
Entity Type:	CORPORATION: FLORIDA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3196507	POWERBRIDGE	
CORRESPONDENCE DATA			
Fax Number:	(212)801-6400		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	212.801.9200		
Email:	elingsr@gtlaw.com		
Correspondent Name:	G. Roxanne Elings - Greenberg Traurig		
Address Line 1:	200 Park Avenue		
Address Line 4:	New York, NEW YORK 10166		
NAME OF SUBMITTER:	G. Roxanne Elings		
Signature:	/GRE/		

CH \$40.00 3196507

900175079

**TRADEMARK
 REEL: 004305 FRAME: 0231**

Date:

10/27/2010

Total Attachments: 8

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ABOVE SPACE FOR OFFICE USE ONLY

Statement of Merger
 (Surviving Entity is a Foreign Entity)
 filed pursuant to § 7-90-203.7 and § 7-90-204.5 of the Colorado Revised Statutes (C.R.S.)

1. For each merging entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

(Caution: At least one merging entity must be an entity formed under the laws of Colorado.)

ID Number	20011076044 <i>(Colorado Secretary of State ID number)</i>		
Entity name or true name	Aimbridge Indirect Lending, LLC		
Form of entity	limited liability company		
Jurisdiction	Colorado		
Street address	118 Inverness Drive East <i>(Street number and name)</i>		
	Suite 250		
	Englewood <i>(City)</i>	CO <i>(State)</i>	80112 <i>(ZIP/Postal Code)</i>
	<i>(Province - if applicable)</i>	<i>(Country)</i>	
Mailing address <i>(leave blank if same as street address)</i>	<i>(Street number and name or Post Office Box information)</i>		
	<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>
	<i>(Province - if applicable)</i>		<i>(Country)</i>

ID Number	20011076053 <i>(Colorado Secretary of State ID number)</i>		
Entity name or true name	Member Lending Acceptance LLC		
Form of entity	limited liability company		

Jurisdiction Colorado

Street address 116 Inverness Drive East
(Street number and name)

Suite 250

Englewood CO 80112
(City) (State) (ZIP/Postal Code)

(Province - if applicable) (Country)

Mailing address
(leave blank if same as street address) (Street number and name or Post Office Box information)

(City) (State) (ZIP/Postal Code)

(Province - if applicable) (Country)

ID Number (Colorado Secretary of State ID number)

Entity name or true name

Form of entity

Jurisdiction

Street address (Street number and name)

(City) (State) (ZIP/Postal Code)

(Province - if applicable) (Country)

Mailing address
(leave blank if same as street address) (Street number and name or Post Office Box information)

(City) (State) (ZIP/Postal Code)

(Province - if applicable) (Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)
 There are more than three merging entities and the ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and the principal address of each additional merging entity is stated in an attachment.

2. For the surviving entity which is a foreign entity, its entity ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are:

(Caution: The surviving entity cannot be an entity formed under the laws of Colorado.)

ID Number (Colorado Secretary of State ID number)

Entity name or true name Cribis Corporation

Form of entity corporation

Jurisdiction Florida

Street address 9505 East Frontage Road
(Street number and name)
Suite 175
Tampa FL 33607
(City) (State) (ZIP/Postal Code)
(Province - if applicable) (Country)

Mailing address
(leave blank if same as street address)
(Street number and name or Post Office Box information)

(City) (State) (ZIP/Postal Code)
(Province - if applicable) (Country)

3. Each merging entity has been merged into the surviving foreign entity.

4. *(If the following statement applies, adopt the statement by marking the box and state the appropriate document number(s).)*

One or more of the merging entities is a registrant of a trademark described in a filed document in the records of the secretary of state and the document number of each filed document is

Document number _____
 Document number _____
 Document number _____

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

There are more than three trademarks and the document number of each additional trademark is stated in an attachment.

5. *(Mark the applicable box and complete the statement. Caution: Mark only one box.)*

The surviving foreign entity maintains a registered agent in this state.

OR

The surviving foreign entity does not maintain a registered agent in this state and service of process may be addressed to the entity and mailed to the principal address pursuant to section 7-90-704 (2), C.R.S.

OR

The surviving foreign entity has not maintained a registered agent in this state and appoints a registered agent to accept service pursuant to section 7-90-204.5, C.R.S. The person appointed as registered agent has consented to being so appointed. Such registered agent's name and address are

Name
 (if an individual) _____
(Last) (First) (Middle) (Suffix)

OR

(if an entity)
(Caution: Do not provide both an individual and an entity name.)

Street address

(Street number and name)

(City) CO (State) (ZIP Code)

Mailing address
(Leave blank, if same as street address)

(Street number and name or Post Office Box information)

(City) CO (State) (ZIP Code)

6. (If applicable, adopt the following statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

7. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are 09/30/2010
(mm/dd/yyyy hour:minute am/pm)

Notice:

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8. The true name and mailing address of the individual causing this document to be delivered for filing are

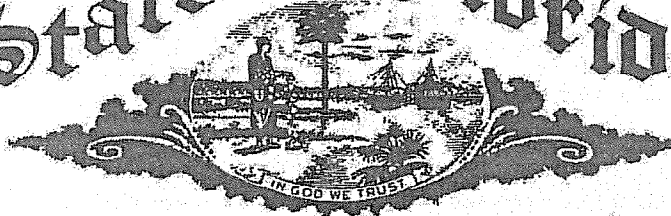
Grieco Steven S.
(Last) (First) (Middle) (Suffix)
Shumaker, Loop & Kendrick, LLP
(Street number and name or Post Office Box information)
101 East Kennedy Blvd., Suite 2800
Tampa FL 33602
(City) (State) (ZIP/Postal Code)
(Province - if applicable) (Country)

(If applicable, adopt the following statement by marking the box and include an attachment.)
This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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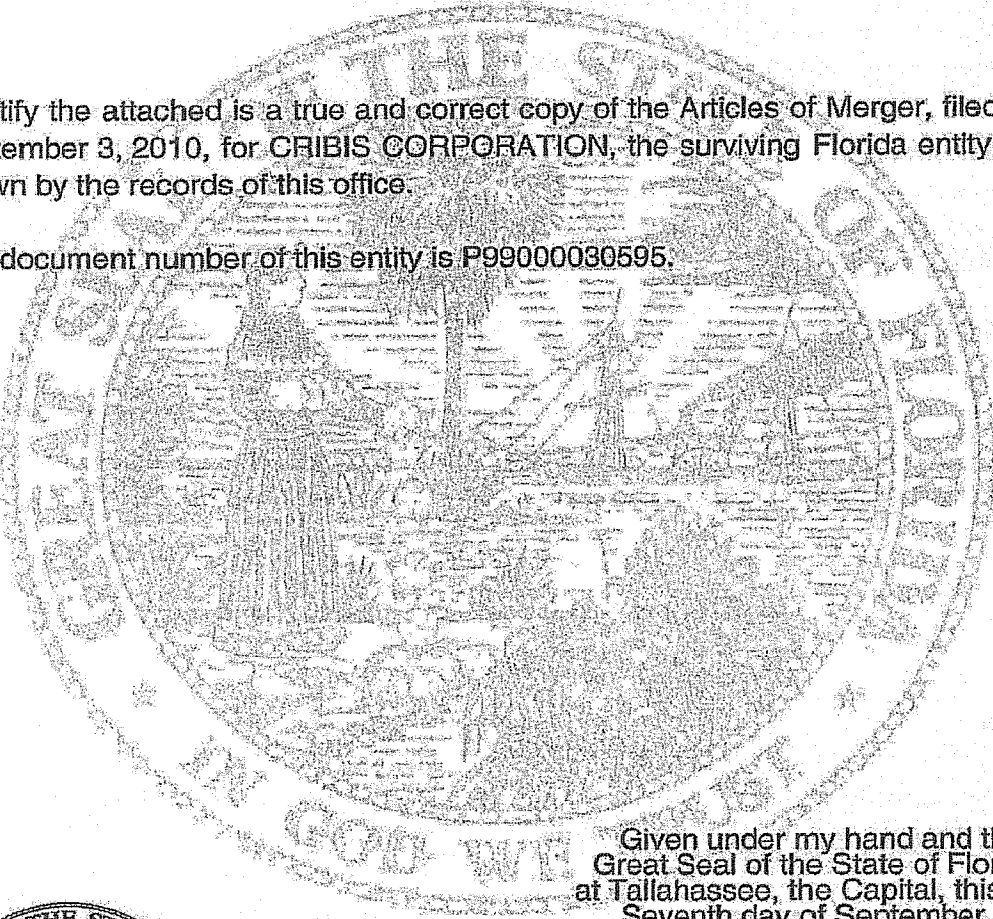
State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Merger, filed on September 3, 2010, for CRIBIS CORPORATION, the surviving Florida entity, as shown by the records of this office.

The document number of this entity is P99000030595.



Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Seventh day of September, 2010



CR2E022 (01-07)

Dawn K. Roberts
Dawn K. Roberts
Secretary of State