

Client Code: MMTV.000GEN

Form PTO-1594 (Rev. 01-09)
OMB Collection 0651-0027 (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): Gidget Marks, LLC <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation- State: _____ <input checked="" type="checkbox"/> Other <u>Limited Liability Company</u> Citizenship (see guidelines) <u>California</u> Additional names of conveying parties attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies) <input type="checkbox"/> Yes Additional names, addresses, or citizenship attached? <input checked="" type="checkbox"/> No Name: <u>Multi-Media Technology Ventures, Ltd.</u> Internal Address: _____ Street Address: <u>668 N. Coast Hwy., #191</u> City: <u>Laguna Beach</u> State: <u>CA</u> Country: <u>United States of America</u> Zip: <u>92651</u> <input type="checkbox"/> Association Citizenship _____ <input type="checkbox"/> General Partnership Citizenship _____ <input checked="" type="checkbox"/> Limited Partnership Citizenship <u>Nevada</u> <input type="checkbox"/> Corporation Citizenship _____ <input type="checkbox"/> Other _____ Citizenship _____ If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input type="checkbox"/> No (Designations must be a separate document from assignment)
3. Nature of conveyance /Execution Date(s) : Execution Date(s) <u>01/10/2011</u> <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other <u>UCC Financing Statement</u>	4. Application number(s) or registration number(s) and identification or description of the Trademark. A. Trademark Application No.(s) <u>77726529 for the mark GIDGET</u> <u>77669571 for the mark GIDGET</u> B. Trademark Registration No.(s) <u>3197189 for the mark GIDGET</u> <u>3234890 for the mark GIDGET</u> Additional sheet(s) attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown): _____ _____ _____	
5. Name & address of party to whom correspondence concerning document should be mailed: Name: <u>Lynda Zadra-Symes</u> Internal Address: _____ Street Address: <u>Knobbe Martens Olson & Bear, LLP</u> <u>2040 Main Street, 14th Floor</u> City: <u>Irvine</u> State: <u>CA</u> Zip: <u>92614</u> Phone Number: <u>949-760-0404</u> Fax Number: <u>949-760-9502</u> Email Address: <u>efiling@kmb.com</u>	6. Total number of applications and registrations involved: 8 7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ <u>215.00</u> <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed
8. Payment Information: Deposit Account Number <u>11410</u> Authorized User Name <u>Knobbe Martens Olson & Bear</u>	
9. Signature: <u>Lynda Zadra-Symes</u> <u>January 14, 2011</u> Signature Date _____ Lynda Zadra-Symes Total number of pages including cover sheet, attachments, and document: 5 Name of Person Signing	

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

CH \$215.00 111410 7772652

Addendum to Recordation Form Cover Sheet Form PTO-1594

Continuation of Item 4. B. Trademark Registration Nos.

U.S. Trademark Registration No. 3740628 for the mark GIDGET

U.S. Trademark Registration No. 2884815 for the mark GIDGET and Design

U.S. Trademark Registration No. 2093572 for the mark GIDGET

U.S. Trademark Registration No. 2858516 for the mark (G DESIGN)

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]Lynda Zadra-Symes
(949) 760-0404**B. SEND ACKNOWLEDGMENT TO: (Name and Address)**Knobbe, Martens, Olson & Bear, LLP
2040 Main Street, 14th Floor
Irvine, CA 92614
USA

DOCUMENT NUMBER: 27544360002

FILING NUMBER: 11-7257108264

FILING DATE: 01/10/2011 12:35

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

OR	1a. ORGANIZATION'S NAME Gidget Marks, LLC				
	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 21882 Bellcroft Drive		CITY Lake Forest	STATE CA	POSTAL CODE 92630	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	1e. TYPE OF ORGANIZATION LLC	1f. JURISDICTION OF ORGANIZATION California	1g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE 200829210038	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

OR	2a. ORGANIZATION'S NAME Gidget Worldwide, Inc.				
	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS 21882 Bellcroft Drive		CITY Lake Forest	STATE CA	POSTAL CODE 92630	COUNTRY USA
2d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	2e. TYPE OF ORGANIZATION Corporation	2f. JURISDICTION OF ORGANIZATION California	2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE C3165475	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME Multi-Media Technology Ventures, Ltd.				
	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 668 N. Coast Hwy., #191		CITY Laguna Beach	STATE CA	POSTAL CODE 92651	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

U. S. Trademark Registration No. 3197189 for the mark GIDGET
 U. S. Trademark Registration No. 3234890 for the mark GIDGET
 U. S. Trademark Registration No. 3740628 for the mark GIDGET
 U. S. Trademark Registration No. 2884815 for the mark GIDGET and Design
 U. S. Trademark Registration No. 2093572 for the mark GIDGET
 U. S. Trademark Registration No. 2858516 for the mark (G DESIGN)

U. S. Trademark Application Serial No. 77726529 for the mark GIDGET

U. S. Trademark Application Serial No. 77669571 for the mark GIDGET

5. ALT DESIGNATION: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING
 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
 Attach Addendum [if applicable]

 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)
 [ADDITIONAL FEE] [optional] All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME Gidget Marks, LLC		
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME					
OR	11b. INDIVIDUAL'S LAST NAME Valles		FIRST NAME Victor	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS 3228 Iowa Street		CITY Costa Mesa	STATE CA	POSTAL CODE 92626	COUNTRY USA
11d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE	

12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME					
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing.

14. Description of real estate:

16. Additional collateral description:

15. Name and address of RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

17. Check only if applicable and check only one box.

Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY
 Filed in connection with a Manufactured-Home Transaction - effective 30 years
 Filed in connection with a Public-Finance Transaction - effective 30 years

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TRADEMARK
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UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

19. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

19a. ORGANIZATION'S NAME Gidget Marks, LLC			
OR	19b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

20. MISCELLANEOUS:

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21. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (21a or 21b) - do not abbreviate or combine names

21a. ORGANIZATION'S NAME				
OR	21b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	Powell	Kevin		
21c. MAILING ADDRESS 21882 Bellcroft Drive		CITY Lake Forest	STATE CA	POSTAL CODE 92630
				COUNTRY USA
21d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	21e. TYPE OF ORGANIZATION	21f. JURISDICTION OF ORGANIZATION	21g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE

22. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (22a or 22b) - do not abbreviate or combine names

22a. ORGANIZATION'S NAME				
OR	22b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
22c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
22d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	22e. TYPE OF ORGANIZATION	22f. JURISDICTION OF ORGANIZATION	22g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE

23. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (23a or 23b) - do not abbreviate or combine names

23a. ORGANIZATION'S NAME				
OR	23b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
23c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
23d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	23e. TYPE OF ORGANIZATION	23f. JURISDICTION OF ORGANIZATION	23g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE

24. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (24a or 24b)

24a. ORGANIZATION'S NAME				
OR	24b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
24c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

25. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (25a or 25b)

25a. ORGANIZATION'S NAME				
OR	25b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
25c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

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RECORDED: 01/18/2011

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