

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
Cantar/Polyair Inc.		02/20/1996	CORPORATION: CANADA
RECEIVING PARTY DATA			
Name:	Polyair Investments Inc.		
Street Address:	330 Humberline Drive		
City:	Toronto		
State/Country:	CANADA		
Postal Code:	M9W 1R5		
Entity Type:	CORPORATION: CANADA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2429253	STAR MOVER	
CORRESPONDENCE DATA			
Fax Number:	(416)361-1398		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	(416) 957-1699		
Email:	vkrichker@bereskinparr.com		
Correspondent Name:	Victor Krichker		
Address Line 1:	40 King Street West		
Address Line 2:	40th Floor		
Address Line 4:	Toronto, CANADA M5H 3Y2		
ATTORNEY DOCKET NUMBER:	5417-51/R		
DOMESTIC REPRESENTATIVE			
Name:			
Address Line 1:			
Address Line 2:			

CH \$40.00 2429253

900185705

**TRADEMARK
 REEL: 004492 FRAME: 0018**

Address Line 3:

Address Line 4:

NAME OF SUBMITTER:

Victor krichker

Signature:

/Victor Krichker/

Date:

03/07/2011

Total Attachments: 7

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TRADEMARK ASSIGNMENT

Electronic Version v1.1 02/17/2011
 Stylesheet Version v1.1 900184305

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Cantar/Polyair Inc.		02/20/1996	CORPORATION:

RECEIVING PARTY DATA

Name:	Polyair Investments Inc.
Street Address:	330 Humberline Drive
City:	Toronto
State/Country:	CANADA
Postal Code:	M9W1R5
Entity Type:	CORPORATION:

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	2429253	STAR MOVER

CORRESPONDENCE DATA

Fax Number: (416)361-1398
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: (416) 957-1699
 Email: vkrichker@bereskinparr.com
 Correspondent Name: Victor Krichker
 Address Line 1: 40 King Street West
 Address Line 2: 40th Floor
 Address Line 4: Toronto, CANADA M5H 3Y2

ATTORNEY DOCKET NUMBER:	5417-51/R
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DOMESTIC REPRESENTATIVE

Name:
 Address Line 1:
 Address Line 2:

CH \$40.00 2429253

Address Line 3:	
Address Line 4:	
NAME OF SUBMITTER:	Victor Krichker
Signature:	/Victor Krichker/
Date:	02/17/2011
Total Attachments: 2 source=Name Change Document#page1.tif source=Name Change Document#page2.tif	

For Ministry Use Only
À l'usage exclusif du ministère

Ontario Corporation Number
Numéro de la compagnie en Ontario



Ministry of
Consumer and
Commercial
Relations

Ministère de
la Consommation
et du Commerce
CERTIFICAT
Ceci certifie que les présents
statuts entrent en vigueur le

CERTIFICATE
This is to certify that these
articles are effective on

1040051

AUGUST 5 AOÛT, 1993

Trans Code	Line No.	Stat.	Comp Type	Method Incorp.	Share
A	0	0	A	3	S
16	20	28	29	30	31
Notice Req'd	Jurisdiction				
N	ONTARIO				A
32	33	47			57

[Signature]
Director / Directeur
Business Corporations Act / Loi de sur les compagnies

**ARTICLES OF AMALGAMATION
STATUTS DE FUSION**

Form 4
Business Corporations
Act,
1982
Formule
numéro 4
Loi de 1982
sur les
compagnies

1. The name of the amalgamated corporation is: *Dénomination sociale de la compagnie issue de la fusion:*

C	A	N	T	A	R	/	P	O	L	Y	A	I	R		I	N	C	.																	

2. The address of the registered office is: *Adresse du siège social:*

106 AVENUE ROAD

(Street & Number or R.R. Number & if Multi-Office Building give Room No.)
Rue et numéro, ou numéro de la R.R. et, s'il s'agit d'un édifice à bureaux, numéro du bureau)

TORONTO, ONTARIO

M 2 R 2 H 3

(Name of Municipality, or Post Office)
Nom de la municipalité ou du bureau de poste

(Postal Code)
(Code Postal)

City of Toronto

in the
dans la

Municipality of Metropolitan

(Name of Municipality,
Geographical Township)
*(Nom de la municipalité,
du canton)*

(County, District, Regional
Municipality) **Toronto**
*Comté, district, municipalité
régionale)*

3. *Number (or minimum and maximum number) of directors is:* *Nombre (ou nombres minimal et maximal) d'administrateurs:*

a minimum of one to a maximum of fifteen

4. The director(s) is/are: **four (4)** *Administrateur(s):*

First name, initials and surname <i>Prénom, initiales et nom de famille</i>	Residence address, giving Street & No. or R.R. No., Municipality and Postal Code <i>Adresse personnelle, y compris la rue et le numéro, le numéro de la R.R. ou le nom de la municipalité et le code postal</i>	Resident Canadian State Yes or No <i>Résident Canadien Oui/Non</i>
FRED A. LITWIN	71 Glen Edyth Drive, Toronto, Ontario. M4V 2V8	YES
DOMENICO MARZANO	25 Whiffle Tree Court Woodbridge, Ontario. L4L 3K1	YES

TRADEMARK