TRADEMARK ASSIGNMENT

Electronic Version v1.1
Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Certificate of Corporate Conversion

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Rovcal, Inc.		06/08/2011	CORPORATION: CALIFORNIA

RECEIVING PARTY DATA

Name:	Rovcal, LLC
Street Address:	601 Rayovac Drive, Law Department
City:	Madison
State/Country:	WISCONSIN
Postal Code:	53711
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Serial Number:	85224084	REMINGTON

CORRESPONDENCE DATA

Fax Number: (404)815-6555
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
Phone: 404-815-6500
Email: nedwards@kilpatricktownsend.com
Correspondent Name: William H. Brewster
Address Line 1: 1100 Peachtree Street, Suite 2800
Address Line 2: Kilpatrick Townsend & Stockton LLP
Address Line 4: Atlanta, GEORGIA 30309

OP $40.00 85224084

ATTORNEY DOCKET NUMBER:	55284-412931
NAME OF SUBMITTER:	Nancy S. Edwards
Signature:	/Nancy S. Edwards/
Date:	07/22/2011

Total Attachments: 1
source=California - Rovcal, Inc to Rovcal LLC#page1.tif

LLC-1A

File # _____

State of California
Secretary of State

Limited Liability Company
Articles of Organization - Conversion

IMPORTANT — Read all instructions before completing this form.

This Space For Filing Use Only

Converted Entity Information

1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," or the abbreviations "LLC" or "L.L.C." The words "Limited" and "Company" may be abbreviated to "Ltd." and "Co.," respectively.)

   Rovcal, LLC

2. THE PURPOSE OF THE LIMITED LIABILTY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.

3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check only one)

   ☑ ONE MANAGER ☐ MORE THAN ONE MANAGER ☐ ALL LIMITED LIABILITY COMPANY MEMBER(S)

4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE | CITY | STATE | ZIP CODE

   811 N. Kelsey Street, Suite 101 | Visalia | CA | 93291

5. NAME OF AGENT FOR SERVICE OF PROCESS (Item 5: Enter the name of the agent for service of process. The agent may be an individual residing in California or a corporation that has filed a certificate pursuant to California Corporations Code section 1505. Item 6: If the agent is an individual, enter the agent's business or residential address in California. Item 7: If the converting entity is a California limited partnership, enter the mailing address of the individual or corporate agent. Check the box and omit the mailing address if the agent's mailing address is the same as the address in Item 6.)

   CT Corporation System

6. **IF AN INDIVIDUAL**, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA | CITY | STATE | ZIP CODE

   | | | CA | |

7. MAILING ADDRESS OF AGENT FOR SERVICE OF PROCESS | CITY | STATE | ZIP CODE

   ☐ THE MAILING ADDRESS OF THE AGENT FOR SERVICE OF PROCESS IS THE SAME AS THE AGENT'S BUSINESS OR RESIDENTIAL ADDRESS IN ITEM 6.

Converting Entity Information

8. NAME OF CONVERTING ENTITY

   Rovcal, Inc.

9. FORM OF ENTITY	10. JURISDICTION	11. CA SECRETARY OF STATE FILE NUMBER, IF ANY
Corporation	California	**C2063405**

12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS:

STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE	**AND**	THE PERCENTAGE VOTE REQUIRED OF EACH CLASS
Common Stock (1,000 shares)		Simple Majority (>50%)

Additional Information

13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

14. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

6/8/11
DATE

SIGNATURE OF AUTHORIZED PERSON — Anthony Genito, Vice President
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON — Nathan Fagre, Secretary
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

TRADEMARK
RECORDED: 07/22/2011 REEL: 004589 FRAME: 0139