

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

|                                   |   |                                      |                            |
|-----------------------------------|---|--------------------------------------|----------------------------|
| <b>SUBMISSION TYPE:</b>           | NEW ASSIGNMENT                              |                                      |                            |
| <b>NATURE OF CONVEYANCE:</b>      | Conversion from Florida LLC to Colorado LLC |                                      |                            |
| <b>CONVEYING PARTY DATA</b>       |   |                                      |                            |
| <b>Name</b>                       | <b>Formerly</b>                             | <b>Execution Date</b>                | <b>Entity Type</b>         |
| Share Memories, LLC               |   | 06/15/2011                           | LIMITED LIABILITY COMPANY: |
| <b>RECEIVING PARTY DATA</b>       |   |                                      |                            |
| <b>Name:</b>                      | Share Memories, LLC                         |                                      |                            |
| <b>Street Address:</b>            | 2800 South University Boulevard, Unit #71   |                                      |                            |
| <b>City:</b>                      | Denver                                      |                                      |                            |
| <b>State/Country:</b>             | COLORADO                                    |                                      |                            |
| <b>Postal Code:</b>               | 80210                                       |                                      |                            |
| <b>Entity Type:</b>               | LIMITED LIABILITY COMPANY: COLORADO         |                                      |                            |
| <b>PROPERTY NUMBERS Total: 19</b> |   |                                      |                            |
| <b>Property Type</b>              | <b>Number</b>                               | <b>Word Mark</b>                     |                            |
| Registration Number:              | 3447017                                     | A TOUCH FROM BEYOND                  |                            |
| Registration Number:              | 3858446                                     |                                      |                            |
| Registration Number:              | 3794077                                     | FAITHFUL FRIENDS RECORDME ALBUM      |                            |
| Registration Number:              | 3796634                                     | FAITHFUL FRIENDS PAWPRINT VIDEO      |                            |
| Registration Number:              | 3796635                                     | FAITHFUL FRIENDS PAWPRINT COLLECTION |                            |
| Registration Number:              | 3803830                                     | IFUNERAL                             |                            |
| Registration Number:              | 3931684                                     | MEMORY VESSEL                        |                            |
| Registration Number:              | 3897764                                     | MOBILE MEMORIES                      |                            |
| Registration Number:              | 3944794                                     | FAITHFUL FRIENDS PAWPRINT ALBUM      |                            |
| Registration Number:              | 3898145                                     | MEMORY NICHE                         |                            |
| Registration Number:              | 3952604                                     | BROKEN HEART                         |                            |
| Serial Number:                    | 85243045                                    | FAITHFUL FRIENDS                     |                            |
| Serial Number:                    | 85243049                                    | FAITHFUL FRIENDS                     |                            |
| Serial Number:                    | 85243061                                    | FAITHFUL FRIENDS                     |                            |

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**TRADEMARK**

|                |          |                   |
|----------------|----------|-------------------|
| Serial Number: | 85243088 | FAITHFUL FRIENDS  |
| Serial Number: | 85243103 | FAITHFUL FRIENDS  |
| Serial Number: | 85243108 | FAITHFUL FRIENDS  |
| Serial Number: | 85292763 | UNLEASH THE GRIEF |
| Serial Number: | 85343494 | SHARE MEMORIES    |

**CORRESPONDENCE DATA**

Fax Number: (303)333-1470  
*Correspondence will be sent via US Mail when the fax attempt is unsuccessful.*  
Phone: 303-333-3010  
Email: tombirney@patnet.com  
Correspondent Name: Thomas S. Birney  
Address Line 1: 501 South Cherry Street, Suite 800  
Address Line 4: Denver, COLORADO 80246

|                         |                    |
|-------------------------|--------------------|
| ATTORNEY DOCKET NUMBER: | SHARE MEMORIES     |
| NAME OF SUBMITTER:      | Thomas S. Birney   |
| Signature:              | /Thomas S. Birney/ |
| Date:                   | 09/06/2011         |

Total Attachments: 5  
source=StatementOfConversion#page1.tif  
source=StatementOfConversion#page2.tif  
source=StatementOfConversion#page3.tif  
source=StatementOfConversion#page4.tif  
source=StatementOfConversion#page5.tif



Colorado Secretary of State  
 Date and Time: 06/15/2011 05:15 PM  
 ID Number: 20101377741

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**Statement of Conversion**

filed pursuant to § 7-90-201.7 (3) of the Colorado Revised Statutes (C.R.S.)

1. For the converting 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

ID number 20101377741  
*(Colorado Secretary of State ID number)*

Entity name or true name Share Memories, LLC

Form of entity Foreign Limited Liability Company

Jurisdiction Florida

Street address 2800 South University Blvd.  
*(Street number and name)*  
Unit #71  
Denver CO 80210  
*(City) (State) (ZIP/Postal Code)*  
United States  
*(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)

2. The entity name of the resulting entity is Share Memories, LLC  
*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*
3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.
4. *(If applicable, adopt the following statement by marking the box and include an attachment.)*  
 This document contains additional information as provided by law.

5. (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 \_\_\_\_\_  
(mm/dd/yyyy hour:minute am/pm)

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

|   |               |                   |          |
|---|---------------|-------------------|----------|
| Rooke   | Eugene        |                   |          |
| (Last)  | (First)       | (Middle)          | (Suffix) |
| 750 Pennsylvania Street                                 |               |                   |          |
| (Street number and name or Post Office Box information) |               |                   |          |
| Denver  | CO            | 80203             |          |
| (City)  | (State)       | (ZIP/Postal Code) |          |
|   | United States |                   |          |
| (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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 select Business Center.

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**Articles of Organization**

filed pursuant to § 7-80-203 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

Share Memories, LLC

*(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)*

*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

2. The principal office address of the limited liability company's initial principal office is

Street address

2800 South University Blvd.

*(Street number and name)*

Unit #71

Denver

*(City)*

CO

*(State)*

80210

*(ZIP/Postal Code)*

United States

*(Country)*

*(Province - if applicable)*

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. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name:

*(if an individual)*

Noel

*(Last)*

Toni

*(First)*

*(Middle)*

*(Suffix)*

OR

*(if an entity)*

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

Street address

2800 South University Blvd.

*(Street number and name)*

Unit #71

Denver

*(City)*

CO

*(State)*

80210

*(ZIP Code)*

**Mailing address**

(leave blank if same as street address)

\_\_\_\_\_ (Street number and name or Post Office Box information)

\_\_\_\_\_

\_\_\_\_\_ CO \_\_\_\_\_ (ZIP Code)

(City) (State)

(The following statement is adopted by marking the box.)

The person appointed as registered agent has consented to being so appointed.

**4. The true name and mailing address of the person forming the limited liability company are**

Name (if an individual) Noel Toni

(Last) (First) (Middle) (Suffix)

OR

(if an entity) \_\_\_\_\_

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

Mailing address 2800 South University Blvd.

(Street number and name or Post Office Box information)

Unit #71

Denver CO 80210

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

United States

(Province - if applicable) (Country)

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

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

**5. The management of the limited liability company is vested in**

(Mark the applicable box.)

one or more managers.

OR

the members.

**6. (The following statement is adopted by marking the box.)**

There is at least one member of the limited liability company.

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

This document contains additional information as provided by law.

**8. (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 is/are \_\_\_\_\_

(mm/dd/yyyy hour:minute am/pm)

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This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

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

|  |                          |                                  |                         |
|--|--------------------------|----------------------------------|-------------------------|
| Rooke  | Eugene                   |                                  |                         |
| <small>(Last)</small>  | <small>(First)</small>   | <small>(Middle)</small>          | <small>(Suffix)</small> |
| 750 Pennsylvania Street  |                          |                                  |                         |
| <small>(Street number and name or Post Office Box information)</small> |                          |                                  |                         |
| <hr/>  |                          |                                  |                         |
| Denver   | CO                       | 80203                            |                         |
| <small>(City)</small>  | <small>(State)</small>   | <small>(ZIP/Postal Code)</small> |                         |
| United States  |                          |                                  |                         |
| <small>(Province -- if applicable)</small>                             | <small>(Country)</small> |                                  |                         |

*(If the following statement applies, adopt the 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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