

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):**  
 Associated Wholesale Grocers, Inc.  
 5000 Kansas Avenue  
 Kansas City, KS 66106

Individual(s)       Association  
 General Partnership       Limited Partnership  
 Corporation- State: Missouri  
 Other \_\_\_\_\_

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached?  Yes  No

**2. Name and address of receiving party(ies)**  
 Additional names, addresses, or citizenship attached?  Yes  No

Name: Associated Wholesale Grocers, Inc.  
 Internal Address: \_\_\_\_\_  
 Street Address: 5000 Kansas Avenue  
 City: Kansas City  
 State: Kansas  
 Country: USA      Zip: 66106

Association      Citizenship \_\_\_\_\_  
 General Partnership      Citizenship \_\_\_\_\_  
 Limited Partnership      Citizenship \_\_\_\_\_  
 Corporation      Citizenship Kansas  
 Other \_\_\_\_\_      Citizenship \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
 (Designations must be a separate document from assignment)

**3. Nature of conveyance )/Execution Date(s) :**  
 Execution Date(s) March 26, 2004

Assignment       Merger  
 Security Agreement       Change of Name  
 Other \_\_\_\_\_

**4. Application number(s) or registration number(s) and identification or description of the Trademark.**

A. Trademark Application No.(s) \_\_\_\_\_  
 B. Trademark Registration No.(s) 2701332

Additional sheet(s) attached?  Yes  No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):  
MAPLE CRISP

**5. Name & address of party to whom correspondence concerning document should be mailed:**  
 Name: Lawrence A. Swain  
 Internal Address: Polsinelli Shughart PC  
 Street Address: 6201 College Boulevard, Suite 500  
 City: Overland Park  
 State: Kansas      Zip: 66211  
 Phone Number: 913-234-7526  
 Fax Number: 913-273-1882  
 Email Address: lswain@polsinelli.com

**6. Total number of applications and registrations involved:** 1

**7. Total fee (37 CFR 2.6(b)(6) & 3.41)** \$40

Authorized to be charged to deposit account  
 Enclosed

**8. Payment Information:**  
 Deposit Account Number 501662  
 Authorized User Name Polsinelli Shalton et al

**9. Signature:** Lawrence A. Swain      3-16-12  
 Signature      Date

\_\_\_\_\_  
 Lawrence A. Swain      Total number of pages including cover sheet, attachments, and document: 2  
 Name of Person Signing

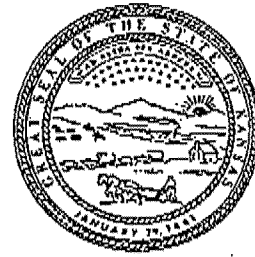
Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

TRADEMARK  
REEL: 004741 FRAME: 0113

CH \$40.00 501662 270133

## STATE OF KANSAS

OFFICE OF  
SECRETARY OF STATE  
RON THORNBURGH



To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the State of Kansas, do hereby certify that I am the custodian of records of the state of Kansas relating to corporations, and that I am the proper official to execute this certificate.

I FURTHER CERTIFY that ASSOCIATED WHOLESALE GROCERS II, INC. is a regularly and properly organized corporation under the laws of the state of Kansas, having been incorporated in Kansas on the 11<sup>th</sup> day of March, A.D. 2004.

I FURTHER CERTIFY that a certificate of merger was filed in this office March 26, 2004 merging ASSOCIATED WHOLESALE GROCERS, INC., a qualified Missouri corporation into ASSOCIATED WHOLESALE GROCERS II, INC., and therefore changing the corporate name to ASSOCIATED WHOLESALE GROCERS, INC.

I DO FURTHER CERTIFY that ASSOCIATED WHOLESALE GROCERS, INC. has paid all fees and franchise taxes due this office and is in good standing according to the records now on file in the office of Secretary of State



In testimony whereof:  
I hereto set my hand and cause  
to be affixed official seal. Done at  
the city of Topeka, this 29<sup>th</sup> day of  
March, A.D. 2004

RON THORNBURGH  
SECRETARY OF STATE

TRADEMARK