

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
VISUAL COMMUNICATIONS COMPANY, INC.		07/03/2012	CORPORATION: CALIFORNIA
RECEIVING PARTY DATA			
Name:	VISUAL COMMUNICATIONS COMPANY, LLC		
Street Address:	12780 DANIELSON CT STE A		
City:	POWAY		
State/Country:	CALIFORNIA		
Postal Code:	92064		
Entity Type:	CORPORATION: CALIFORNIA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	1150257	CUBELITE	
Registration Number:	1232330	P-C-LITE	
CORRESPONDENCE DATA			
Fax Number:	6508384350		
	<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>		
Phone:	6508384300		
Email:	zlu@perkinscoie.com		
Correspondent Name:	Perkins Coie LLP		
Address Line 1:	P.O.BOX 1208		
Address Line 4:	Seattle, WASHINGTON 98111-1208		
ATTORNEY DOCKET NUMBER:	78874-4000		
NAME OF SUBMITTER:	Zhou Lu		
Signature:	/Zhou Lu/		

CH \$65.00 1150257

Date:

04/01/2013

Total Attachments: 2

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**State of California
Secretary of State**

LLC-1A

File #

**Limited Liability Company
Articles of Organization - Conversion**

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

JUL - 9 2012

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.)

Visual Communications Company, LLC

2. **THE PURPOSE OF THE LIMITED LIABILITY 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

12780 Danielson Court, Suite A

Poway

CA 92064

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.)

Corporation Service Company which will do business in California as CSC - Lawyers Incorporating Service

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**

Visual Communications Company, Inc.

9. **FORM OF ENTITY**

Corporation

10. **JURISDICTION**

CA

11. **CA SECRETARY OF STATE FILE NUMBER, IF ANY**

C0815920

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

1700 shares of Common Stock two-thirds

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.**

July 2, 2012

DATE

SIGNATURE OF AUTHORIZED PERSON

Andrew Dumke, Director, Vice President and Secretary
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

10895170

10895170



I hereby certify that the foregoing
transcript of _____ page(s)
is a full, true and correct copy of the
original record in the custody of the
California Secretary of State's office.

JUL 08 2012

Date: _____

Debra Bowen
DEBRA BOWEN, Secretary of State

TRADEMARK