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ETAS v.1.6.5

PTO-1594 (Rev. 11/15)

OMB No. 0651-0027 (Exp. 04/30/2015)

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**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Wholesale Supplies Plus.com, Inc.		10/20/2011	CORPORATION: OHIO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Wholesale Supplies Plus, Inc.		
<b>Street Address:</b>	10035 Broadview Rd.		
<b>City:</b>	Broadview Heights		
<b>State/Country:</b>	OHIO		
<b>Postal Code:</b>	44147		
<b>Entity Type:</b>	CORPORATION: OHIO		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
Registration Number:	2665735	CRAFTER'S CHOICE	

<b>Registration Number:</b>	2697590	CRAFTER'S CHOICE
<b>Serial Number:</b>	77957398	NATURALLY SMART

<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	2165200145
<b>Phone:</b>	216-342-3342
<b>Email:</b>	whvipgroup@wegmanlaw.com
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
<b>Correspondent Name:</b>	Bruce Peacock
<b>Address Line 1:</b>	6055 Rockside Woods Blvd.
<b>Address Line 2:</b>	Ste. 200
<b>Address Line 4:</b>	Cleveland, OHIO 44131

<b>NAME OF SUBMITTER:</b>	Iken S. Sans
<b>Signature:</b>	/iss/
<b>Date:</b>	04/19/2013

<b>Total Attachments: 3</b> source=Name Change#page1.tif source=Name Change#page2.tif source=Name Change#page3.tif
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Fee calculated, according to the USPTO fee table				
Description	Fee code	Fee code amount	Quantity	Fee
Recording trademark assignment, agreement or other paper, first mark per document	8521	40.0	1	40.0
For second and subsequent marks in the same document	8522	25.0	2	50.0
<b>Total</b>				<b>\$90.00</b>

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04/19/2013 03:25 PM EDT



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/27/2011	201129900986	DOMESTIC/AMENDMENT TO ARTICLES (AMD)	50.00	.00		.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

WEGMAN, HESSLER & VANDERBURG  
6055 ROCKSIDE WOODS BLVD, #200  
CLEVELAND, OH 44131

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Jon Husted**

**1098628**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**WHOLESALE SUPPLIES PLUS, INC.**

and, that said business records show the filing and recording of:

Document(s):

**DOMESTIC/AMENDMENT TO ARTICLES**

Document No(s):

**201129900986**



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus,  
Ohio this 20th day of October, A.D.  
2011.

Ohio Secretary of State



Prescribed by:

The Ohio Secretary of State  
Central Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us  
e-mail: busserv@sos.state.oh.us

**Expedite this Form:** (Select One)

**Mail Form to one of the Following:**

- Yes PO Box 1390  
Columbus, OH 43216  
\*\*\* Requires an additional fee of \$100 \*\*\*
- No PO Box 1329  
Columbus, OH 43216

**Certificate of Amendment by  
Shareholders or Members  
(Domestic)  
Filing Fee \$50.00**

2011 OCT 23 10:12:09

**(CHECK ONLY ONE (1) BOX)**

<b>(1) Domestic for Profit</b> <input type="checkbox"/> Amended (122-AMAP)	<b>PLEASE READ INSTRUCTIONS</b> <input checked="" type="checkbox"/> Amendment (125-AMDS)	<b>(2) Domestic Nonprofit</b> <input type="checkbox"/> Amended (126-AMAN) <input type="checkbox"/> Amendment (128-AMD)
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**Complete the general information in this section for the box checked above.**

Name of Corporation Wholesale Supplies Plus.Com, Inc.

Charter Number 1098628

Name of Officer Deborah L. May

Title President

Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

A meeting of the  shareholders  directors (*nonprofit only*)

members was duly called and held on \_\_\_\_\_ (Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise \_\_\_\_\_ % as the voting power of the corporation.

In a writing signed by all of the  shareholders  directors (*nonprofit amended articles only*)

members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

**Clause applies if amended box is checked.**

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.  
If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: Wholesale Supplies Plus, Inc.

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

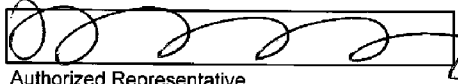
\_\_\_\_\_  
(city, village or township) (county)

THIRD: The purposes of the corporation are as follows:

[Empty rectangular box for purposes of the corporation]

FOURTH: The number of shares which the corporation is authorized to have outstanding is: \_\_\_\_\_  
(Does not apply to box (2))

**REQUIRED**  
Must be authenticated  
(signed) by an authorized  
representative  
(See Instructions)

 10-13-11  
Authorized Representative Date

Deborah L. May  
(Print Name)  
10035 Broadview Road  
Broadview Heights, OH 44147

Authorized Representative Date

\_\_\_\_\_  
(Print Name)  
\_\_\_\_\_  
\_\_\_\_\_