# OP \$165.00 7712139

### TRADEMARK ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the RECEIVING PARTY DATA. STATE OR COUNTRY WHERE ORGANIZED SHOULD BE: DELAWARE. previously recorded on Reel 003651 Frame 0043. Assignor(s) hereby confirms the CONVERSION TO LLC.

### **CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Levlad, LLC		106/05/2007	LIMITED LIABILITY COMPANY: CALIFORNIA

### **RECEIVING PARTY DATA**

Name:	Levlad, LLC
Street Address:	9200 Mason Avenue
City:	Chatsworth
State/Country:	CALIFORNIA
Postal Code:	91311
Entity Type:	LIMITED LIABILITY COMPANY: DELAWARE

## PROPERTY NUMBERS Total: 6

Property Type	Number	Word Mark	
Serial Number:	77121390	RAINWATER	
Serial Number:	76607210	OH WHAT A NIGHT	
Serial Number:	76607209	LIGHT SWITCH	
Serial Number:	76607207	C FOR YOURSELF	
Serial Number:	76606355	HAVE A VINE DAY	
Serial Number:	73208710	NATURE'S GATE	

### **CORRESPONDENCE DATA**

**Fax Number**: 9498520004

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

via US Mail.

 Phone:
 (949) 852-0000

 Email:
 tess@kppb.com

TRADEMARK REEL: 005014 FRAME: 0787

Correspondent Name: John W. Peck Address Line 1: 2400 E. Katella Ave, Suite 1050 Address Line 4: Anaheim, CALIFORNIA 92806 ATTORNEY DOCKET NUMBER: LEVLAD CORRECTIVE NAME OF SUBMITTER: Tina Huynh Signature: /Tina Huynh/ Date: 04/25/2013 Total Attachments: 7 source=assignment-tm-3651-0043#page1.tif source=assignment-tm-3651-0043#page2.tif source=assignment-tm-3651-0043#page3.tif source=assignment-tm-3651-0043#page4.tif source=assignment-tm-3651-0043#page5.tif source=assignment-tm-3651-0043#page6.tif source=assignment-tm-3651-0043#page7.tif

TRADEMARK
REEL: 005014 FRAME: 0788

10-29-2007



U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office EET

Form PTO-1594	EET U.S. DEPARTMENT OF COMMERCE				
(Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2	184 U.S. Patent and Trademark Office				
	Please record the attached original documents or copy thereof.				
Name of conveying party(ies):	Name and address of receiving party(ies):				
LEVLAD INC.	Name: LEVLAD, LLC				
Individual(s)  General Partnership  Limited Partnership	Internal Address: Street Address: 9200 Mason Avenue				
X Corporation-State California					
Other:	City: Chatsworth				
	State: CA Zip: 91311				
Additional name(s) of conveying Yes party(ies) attached?	nd ividual(s) citizenship: Asso ciation:				
3. Nature of Conveyance:	General Partnership:				
Assignment Merger	imited Partnership:				
Security Agreement Change of Name	Corpo ration-State:				
X Other: Conversion to LLC	X Other: California Limited Liability Company				
Execution Date:	If assignee is not domiciled in the United States, a domestic representative designation is attached: (Designations must be a separate document from assignment) Additional name(s) & address(es) attached?  Yes X No				
4. Application Number(s) or Registration Number(s):					
A. Trademark Application No.(s):     See schedule A     attached	B. Trademark Registration No.(s): See schedule A attached				
Additional numbers attached?	Yes X No				
<ol><li>Name and address of party to whom correspondence concerning document should be mailed:</li></ol>	6. Total Number of applications and registrations involved:				
Name: Robert Berliner	7. Total fee (37 CFR 3.41) \$ 1,140.00				
BERLINER & ASSOCIATES	X Pd 7/25/07 see attached <b>Document ID #103432861</b>				
Internal Address: Atty. Dkt.: 2625-100					
Street Address: 555 w. Fifth Street, 31st Floor					
	8. Deposit account number: 50-3881				
City: Los Angeles State: CA Zip: 90013	For any overpayment or under payment				
Oit): 200: 1:3	E THIS SPACE				
Statement and signature:     To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.					
	October 18, 2007				
Robert Berliner Name of Person Signing	Signature Date				
Name of Person Signing  Total number of pages including cover st					

Serial No.	Registration No.	<u>Mark</u>
78648101		TONE BACK THE CLOCK
78670860	3178540	REPLENIPLEX
78670637	3172505	NATURAL RESULTS
78785676		SICURO
78797187		STRANDING FIRM
78648119	3170056	IN THE BEGINNING
78796400		STRAIGHTEN UP AND LIE RIGHT
78797152		FOREVER AND A SPRAY
78797145		IN LIVING COLOR
78797136		STAYIN' ALIVE
78788403		HOLD THAT POSE
78785620		PRESENTO
78785502		LABRINTO
78781181		IT'S SUNBEATABLE
78781135		HAPPY GLOW LUCKY
78781125		UPPER TANAGEMENT
78781116		BE SOLECTIVE
78781096		SUNDERCOVER
78976772	3102332	NATURE'S GATE ORGANIC THERAPY
77121405		RAINWATER ORGANICS
77121390		RAINWATER
76185455	3002192	ORGANIC THERAPY
76185454	2743235	NATURE'S GATE ORGANICS
76511726	2893961	ORGANIC SPA COLLECTION
76653614	3232194	NATURE'S GATE ORGANICS ADVANCED CARE
76586325		NATURE'S GATE ORGANICS FRUIT BLEND
76607210	3085964	OH WHAT A NIGHT
76607209	3085963	LIGHT SWITCH
76607207	3085962	C FOR YOURSELF
76606355	3098660	HAVE A VINE DAY
76606350	3098659	FORGET YOUR LINES
76608078	3022644	SAVE FACE
75535882	2500672	SAVE FACE & Design
75334309	2232954	AQUABLOCK
75212413	2179434	FACIAL POLISH
75212412	2473839	DEODORMINT
74372305	1980339	SPRINGBROOK
74515622	1929299	NO ANIMAL TESTING
74220578	1744210	PETAL FRESH
74695589	2014565	FOREST PURE
74610759	1997582	SILLY VANILLY
74371130	1811785	BATH MOODS
73208710	1166898	NATURE'S GATE
73388661	1289681	ALOEGEN
73291400	1246795	LIP SERVICE

SCHEDULE A

TRADEWARK REEL: 003034 FRANE: 07094

orm PTO-1594 (Rev. 07/05)	01-2007 U.S. DEPAR 07-27-2007
MB Collection 0651-0027 (exp. 6/30/20	United States PateU.S.Patert.s.TMOT/TM Mai
regular rain morge print at	and the trace think with the total
	432861
. Name of conveying party(ies):	2. Name and address of receiving party(ies)
LEVLAD, INC.	Additional names addresses or citizenship attached?
	Name: LEVLAD, LLC
	Internal
Individual(s) Association	Address:
General Partnership Limited Partnership	Street Address: 9200 Mason Avenue
XX Corporation- State: California	City:Chatsworth
Other	State: CA
Citizenship (see guidelines)	Country: USA Zip: 91311
dditional names of conveying parties attached?	
Alatura of convoyance VEvenution Details	General Partnership Citizenship
8. Nature of conveyance )/Execution Date(s):	Limited Partnership Citizenship
Execution Date(s)	X Corporation Citizenship California
Assignment Merger	OtherCitizenship
Security Agreement Change of Name	If assignee is not domiciled in the United States, a domestic
X Other Conversion to LLC	representative designation is attached: Yes No (Designations must be a separate document from assignment)
4. Application number(s) or registration number(s) a	and identification or description of the Trademark.
A. Trademark Application No.(s)	B. Trademark Registration No.(s)
See Schedule A attached	See Schedule A attached
	Additional sheet(s) attached? Yes No
C. Identification or Description of Trademark(s) (and Fill	ing Date if Application or Registration Number is unknown):
	·
5. Name & address of party to whom correspondence	ce 6. Total number of applications and
concerning document should be mailed:	registrations involved: 45
Name: Robert Berliner	07.070.000.000.000.000
nternal Address: BERLINER & ASSOCIATES	7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 1,140.00  Authorized to be charged by credit card
	Authorized to be charged by cledit card
Street Address: 555 West 5th St., 31st Fl	Authorized to be charged to deposit account
Street Address: 555 West 5th St., 31st Fl	Authorized to be charged to deposit account (22)  Enclosed Check # 1515 88
Street Address: 555 West 5th St., 31st Fl	Authorized to be charged to deposit account Enclosed Check # 1515 88  8. Payment Information:
City: Los Angeles	Authorized to be charged to deposit account Enclosed Check # 1515 88  8. Payment Information:  Debit or credit any overpayment ar
City: Los Angeles State: California Zip: 90013	Authorized to be charged to deposit account  Enclosed Check # 1515 88  8. Payment Information:  Debit or credit any overpayment under payment to:
City: Los Angeles  State: California Zip: 90013  Phone Number: (213) 533-4171	Authorized to be charged to deposit account  Enclosed Check # 1515 38  8. Payment Information:  Debit or credit any overpayment under payment to:  Deposit Account Number 50-3881
City: Los Angeles  State: California Zip: 90013  Phone Number: (213) 533-4171	Authorized to be charged to deposit account Enclosed Check # 1515 88  8. Payment Information:  Debit or credit any overpayment under payment to:  Deposit Account Number 50-3881  Authorized User Name Robert Berliner
City: Los Angeles  State: California Zip: 90013  Phone Number: (213) 533-4171  Fax Number: (213) 533-4174  Email Address: rberliner@berliner-ip.com	Authorized to be charged to deposit account Enclosed Check # 1515 88  8. Payment Information:  Debit or credit any overpayment under payment to:  Deposit Account Number 50-3881  Authorized User Nam Robert Berliner 8  July 25, 2007
City: Los Angeles  State: California Zip: 90013  Phone Number: (213) 533-4171	Authorized to be charged to deposit account Enclosed Check # 1515 88  8. Payment Information:  Debit or credit any overpayment under payment to:  Deposit Account Number 50-3881  Authorized User Name Obert Berliner 8  July 25, 2007  Date
City: Los Angeles  State: California Zip: 90013  Phone Number: (213) 533-4171  Fax Number: (213) 533-4174  Email Address: rberliner@berliner-ip.com  9. Signature:	Authorized to be charged to deposit account Enclosed Check # 1515 88  8. Payment Information:  Debit or credit any overpayment under payment to:  Deposit Account Number 50-3881  Authorized User Nam Robert Berliner 8  July 25, 2007

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

# State of California Secretary of State



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of \_\_\_\_\_ page(s) was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

JUN (55 20)

DEBRA BOWEN
Secretary of State



# -200522410152

Ju

in the office of the Secretary of State of the State of California

JUN 1 6 2006

# **CERTIFICATE OF CONVERSION**

IMPORTANT	· Read all	instructions in the second	before c	ompleting	this form.
COMMERTED	SHITTLY MAN	MATICAL			

This Space For Flling Use Only

				·		
1. NAME OF CONVERTED ENTITY  Leviad, LLC						
2. FORM OF ENTITY		Ta	Maria			
Limited Liability Company		3. JURISO				
4. MAILING ADDRESS OF CHIEF EXECUTIVE	EOCEIOC	Delawar		<del></del>		
9200 Misson Avenue	EUPPIGE		ND STATE		ZIP CODE	
5. STREET ADDRESS OF CHIEF EXECUTIVE	CENT	Chatsworth,			91311	
9200 Mason Avenue	OTTICE	Chatsworth.	ND STATE		ZIP CODE	
6. STREET ADDRESS OF THE CALIFORNIA	DEFICE IF ANY	CfTY	<u> </u>		91311	
9200 Mason Avenue	or i lossi a sasi		, i	STATE CA	ZIP CODE	
7. MAILING ADDRESS OF AGENT FOR SERV	ACE OF SPACES	Chatsworth	ND STATE		91311	
2711 Centerville Road, Suite 400	HOL OF PROCESS				ZIP CODE	
CONVERTING ENTITY INFORMATION		Wilmington,	DE .		19808	
8. NAME OF CONVERTING ENTITY	······································			<del>'</del>		
Levled, LLC						
9. FORM OF ENTITY	10. JURISOICTION		11 CA SECRETARY	OF STATE S	T AN HOUSE OF ANAL	
Limited Liability Company	California		11. CA SECRETARY OF STATE FILE NUMBER, IF ANY 200522410152			
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 MUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS  Limited liability company membership interest (of sole member)  100%						
ADDITIONAL INFORMATION						
13. ADDITIONAL IMPORMATION SET FORTH OF PART OF THIS CERTIFICATE.						
14. I CERTIFY UNDER PENALTY OF PERLURY 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.						
SIGNATURE OF AUTHORIZED PERSON	0918/2008.	Michael B TYPE OR PI	. DeFlorio, Manager ANT NAME AND TITLE	OF AUTHOR	ZED PERSON	
SIGNATURE OF AUTHORIZED PERSON	DATE	TYPE OR PI	SINT NAME AND TITLE		ZED PERSON	
			<b>A</b>	PPINOVED SY S	BLUGE   MIT UP-BIA) 4 "1.	

CONV-1A (REV 082005)

TRADEMARK REEL: 005054 FRANKE: 070467



LLCIA (REV DETECTO)

# State of California Secretary of State

# the office of the Secretary of State of the State of California

AUG 0 5 2005

# LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION - CONVERSION

IMPORTANT --- Read all Instructions before completing this form. This Space For Fang use Only CONVERTED ENTITY INFORMATION MASE OF LIGHTED LIGHTY COMPANY (End the name with the words "Linded Lightly Company," "List Lightly Company," "List Lightly Company," "List Lightly Co.," or the abbreviation "LLC" or "L.L.C.") Levied, LLC THE PURPOSE OF THE LIMITED LIABILTY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ALTITYTY FOR WHICH A LIMITED LIMILITY
COMPANY MAY BE CHIQANIZED UNDER THE SEVERLY-RELEA LIMITED LIMITED COMPANY ACT. THE LIMITED LIABILITY COMPANY WILL SE MANAGED BY (Check only and) ONE HAMAGER MORE THAN ONE MANAGER ALL LIMITED LIABILITY COMPANY MEMBER (2) 4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE CITY AND STATE 9200 Meton Avenue Chataworth, CA HAMIF OF AGENT FOR SERVICE OF PROCESS If the opent is an included, the opent must reside in California and team 5 and 6 must be completed. If the agent to a comparation, the agent must have on the with the California Recruitry of Seaso a cartificate partners to Carporative Code completed. If the agent to a conjunction, the agent must have an exclan 1505 and flore 3 must be completed (serve than 6 blank).) Harold B. Williams, Ir. 4. IF AN INDIVIOUAL ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA CITY 2P COOL STATE CA 9200 Mason Avenue 91311 Chauworth CONVERTING ENTITY INFORMATION NAME OF CONVERTING ENTITY Leviad, loc IQ CASECRETARY OF STATE FILE MANGER # MY FORM OF ENTITY A RIMISDICTION Corporation California C0745879 11. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHAPES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE POLLOWING EQUE STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS Common Stock; One (1) share issued and outstanding and entitled to vote 100% ADDITIONAL INFORMATION 12. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE. 13. I CERTIFY UNDER PERMITY OF PERMITY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE PORESCENG IS TRUE AND COMMET OF MY OWN INCOMEDIE. FORCHARD, AN THE PURION WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. Michael S. DeFlorio, Chairman of the Board 05 TYPE OR PRENT HAME AND TITLE OF AUTHORIZED PERSON SIGNATURE OF AUTHORIZED PERSON Christopher D. Whelen, Assistant Secretary TYPE OR PRINT NAME AND TITLE OF AUTYORISES PERSON DATE SIGNATURE OF AUTHORIZED PERSON PROMOVED BY MECHE INST. OF SAVI

> TRADEMARK REEL: 005054 FRANKE: 07048



# State of California Secretary of State

	LIMITED LIABII ARTICLES OF ORGANI	LITY COMPANY ZATION - CONVERSION	ON			
18	(PORTANT — Read all Instructio	ns before completing this fe	Min.	This Spec	For Filing	Use Cray
	ONVERTED ENTITY INFORMATION					
1.	HAME OF LIMITED LIABILITY COMPANY elonwhiten "LLC" or "LLC")	(End the name with the works "Umfort t	manthy C	empany," "List. Liability Con	rpeny," "Lid	Listing Co. " or 916
	Lovind, LLC					
2.	THE PURPOSE OF THE UNITED WASL'T COMPANY MAY BE ORGANIZED UNDER	y company is to engace in any l The squerly-kaller limited labit	antil Lity co	ACT OR ACTIVITY FOR W MPANY ACT	HCH A LAM	TED LINELTY
3.	THE LIMITED LIABILITY COMPANY WILL	DE MANAGED BY (Chieck enty ente)	April	Control to the same state of t		
	OHE MANAGER	MORE THAN ONE HANAGER		ALL LIMITED : N	MITY COM	PANY MELECT(1)
4	MAILING ADDRESS OF THE CHIEF EXEC	UTIVE OFFICE	Ć.i	T AND STATE		DF 0004
	9200 Mason Avenue		Chu	itrworth, CA		91311
5.	NAME OF AGENT FOR SERVICE OF PROCESSION, If the agent is a comparation, the section 12% and from 3 must be compared illeroid E. Williams, Jr.	l secont award have on the with the Calife	ie agent mie Sac	thus reads in California a resery of Mass a cartillaria		ns E and B must be Compressions Code
6.	IF AN INDIVIOUAL, ADORESS OF AGENT	FOR SERVICE OF PROCESS IN CA	cm	**************************************	STATE	29 COOE
	9200 Magon Avenus		Chara	rworth	CA	91311
CC	INVERTING ENTITY INFORMATION					
7.	NAME OF CONVERTING BITITY	The state of the second			- Particular of the Anticological	
	Leviad, Inc.					
3.	FORM OF ENTITY	9. JURISDICTION		10. CA SECRETARY OF	STATE FIL	ENLANCER FANY
	Corporation	Celifornia		C2745879		
	THE PRINCIPAL TERMS OF THE PLAN OF CITATE EQUALED ON EXCEEDED THE VOTE IN STATE THE CLASS AND NUMBER OF OUTST CORDINO Stock; One (1) share issued as	WONG MENERIS ENTRED TO VOT	-	C LINE LOTTONIANO CONTRA		
2	EDITIONAL INFORMATION  ADDITIONAL INFORMATION SET FORTH OF THIS CENTERCATE.	IN THE ATTACHED PAGES, IF ANY, IS	MCOR	PORATED HEREN BY TH	e refere	ACE WID HAVE V
3.	PART OF THIS CENTIFICATE.  I CERTIFY UNDER PENALTY OF PERSURY UNDER PENALTY OF PERSURY UNDER PENALTY OF PERSURY UNDER PERSURY OF PERSURY UNDER PERSURY OF PERSURY UNDER PERSURY OF PERSURY					COMMETT OF MY
	SIGNATURE OF AUTHORIZED PERSON	DATE TVE	E OR PF	Defloris, Chairman of BRY NAME AND TITLE OF T D. Wholen, Assistant S	WILHOUSE	PERSON
	SENERO STATING PERSON	3/5/05	OR P	THE SAME AND THE OF	AUTHORES	
				A	HOVED BY	SCREENIS OF STATE

LLCIA DEVOSTORA

TRADENVARK REEL: 005654 FRANCE: 07049