TRADEMARK ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	12/31/2012

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Video Plus, L.P.		112/11/2012	LIMITED PARTNERSHIP: TEXAS

RECEIVING PARTY DATA

Name:	VPI Holding Co.
Street Address:	200 Swisher Road
City:	Lake Dallas
State/Country:	TEXAS
Postal Code:	75065
Entity Type:	CORPORATION: DELAWARE

PROPERTY NUMBERS Total: 14

Property Type	Number	Word Mark
Registration Number:	1731494	VIDEO PLUS
Registration Number:	4268676	VIDEOPLUS
Serial Number:	85486143	VIDEOPLUS
Registration Number:	3329520	TOOLS CULTURE
Registration Number:	3352405	TOOL CULTURE
Registration Number:	3734584	TOOLS WORK
Registration Number:	3445887	PREMIER BUSINESS
Registration Number:	3468774	BREAKTHROUGHS IN HEALTH
Registration Number:	3545488	DIRECT SELLING NEWS
Registration Number:	3550957	DSN
Serial Number:	78332790	SUCCESS ONLINE
Registration Number:	2975833	WORKING AT HOME
		TDADEMARK

REEL: 005051 FRAME: 0786

Registration Number:	4158007	THE RIGHT EDGE
Registration Number:	2871936	2GO

CORRESPONDENCE DATA

Fax Number: 2142105941

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

via US Mail.

Phone: 214-210-5940 Email: docket@grspc.com

Correspondent Name: Schultz & Associates, P.C.

Address Line 1: 5400 LBJ Freeway

Address Line 2: Suite 1200

Address Line 4: Dallas, TEXAS 75240

ATTORNEY DOCKET NUMBER:	87563.0101
NAME OF SUBMITTER:	George R. Schultz
Signature:	/george r. schultz/
Date:	06/19/2013

Total Attachments: 4

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Form 622 (Revised 05/11)

Return in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512 463-5709 Filing Fee: see instructions



Certificate of Merger Combination Merger **Business Organizations Code** This space reserved for office use.

FILED In the Office of the Secretary of State of Texas

DEC 17 2012

Corporations Section

Parties to the Merger

Pursuant to chapter 10 of the Texas Business Organizations Code, and the title applicable to each domestic filing entity identified below, the undersigned parties submit this certificate of merger.

The name, organizational form, state of incorporation or organization, and file number, if any, issued by the secretary of state for each organization that is a party to the merger are as follows:

Party 1				
Video Plus, L.P.				
Name of Organization The organization i	s a limited partnership	74 :		
•	Specify organizational form (e.g., f	for-profit corporation)	s organized under the la	aws of
TX -		file number, if any, is	800435115	
State Country		•	Texas Secretary of State file nu	unber
its principal place	of business is 200 Swisher Road		ake Dallas	TX
	on will survive the merger.	The organization	will not survive the me	Stat
The plan of me	erger amends the name of the o	organization. The new	name is set forth below	<i>7</i> ,
Party 2	Name	as Amended		
VPI Holding Co.				
Name of Organization				
The organization is		It is	organized under the lay	af
.	Specify organizational form (e.g., for	-profit corporation)	or Barresa mindel mis 184	WS OI
		file number, if any, is	<u>.</u> "	
State Country	1 .	• • • • • • • • • • • • • • • • • • • •	Texas Secretary of State file num	ber
ris principal place of	f business is 200 Swisher Road		ke Dallas	TX
★ The organization	will survive the merger.	The organization	will not survive the mer	State
The plan of mer	ger amends the name of the		•	80
· ·	ger amends the name of the or	ganization. The new n	ame is set forth below.	
	Name as	: Amended		·· · ···
Perty 3				
Name of Organization	w		-	
The organization is a		It is o	rganized under the laws	s of
	Specify organizational form (e.g., for-p	profit corporation)	. –	
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Its principal place of business is Address The organization will survive the merger. The plan of merger amends the name of the	
☐ The organization will survive the merger. ☐ The plan of merger amends the name of the	☐ The organization will not survive the merge
The plan of merger amends the name of the	
Na	ne organization. The new name is set forth below.
	ime as Amended
Pla	n of Merger
The plan of merger is attached.	2.
	d, the following statements must be completed.
	tive Statements
In lieu of providing the plan of merger, each do	mestic filing entity certifies that:
1. A signed plan of merger is on file at the prin	ncipal place of business of each surviving, acquiring that is named in this form as a party to the merger or
entity that is a party to or created by the plan multiple surviving domestic entities or non-cod to the merger at the time of the merger if a liabil Complete tem 3B if the merger effected changes	to the certificate of formation of a surviving filling entity. tion of any surviving filing entity that is a party to the
Name of filing entity effecting amendments	
wame of firing entry effecting amendments	
The changes or amendments to the filing entity's	certificate of formation, other than the name change
The changes or amendments to the filing entity's noted previously, are stated below.	certificate of formation, other than the name change
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The changes or amendments to the filing entity's noted previously, are stated below.	certificate of formation, other than the name change
The changes or amendments to the filing entity's noted previously, are stated below.	<u>:</u>

N	ame of New Organization !		Jurisdiction	Entity Type (See instructions)
_				
Pi	rincipal Place of Business Address	City	:	State Zip Code
			į.	
			;	
Ne	ame of New Organization 2		Jurisdiction	Entity Type (See instructions)
	4	•		
Pr	incipal Place of Business Address	City		State Zlp Code
	•			•
	*		·	
Na	me of New Organization 3		Jurisdiction	Entity Type (See instructions)
				, ,, , , ===,
Pri	ncipal Place of Business Address	Clty		State Zip
	A	1 641 70		•
		oval of the Plan of Me	-	
Th on	te plan of merger has been approved a ganization that is a party to the merge	s required by the laws or and by the governing o	of the jurisdicti	on of formation of each hose organizations.
	The approval of the owners or memb			-
•••			Name of domes	le entity
wa	s not required by the provisions of the	BOC.		•
	TO OTE - Address.	6 13111		•
	Enectiven	ess of Filing (Select cither	A, B, or C.)	
A .,	This document becomes effective	when the document is a	ccepted and fi	led by the secretary of
stat				
В.	This document becomes effective	at a later date, which is	not more than	ninety (90) days from
the	date of signing. The delayed effective	e date is: December 31.2	012 :	may (20) aaya mom
c. [This document takes effect on the	occurrence of the future	arrant on fort	- 4h - 11 41
Dass	sage of time. The 90 th day after the day	eta of signing in	event or fact,	other than the
The	following over as fact with	ate of signing is:		
1110	following event or fact will cause the	document to take effec	t in the manne	r described below:
	-			
		Tax Certificate		
		rax Certificate		
	Attached hereto is a certificate from 2, Tax Code, have been paid by the	the comptroller of publ non-surviving filing ent	ic accounts tha	t all taxes under title
X	In lieu of providing the tax certifica organizations will be liable for the pa	te, one or more of the s	urvivina acau	iring or newly created
om 622		-		
		7		

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument. The undersigned certifies that the statements contained herein are true and correct, and that the person signing is authorized under the provisions of the Business Organizations Code, or other law applicable to and governing the merging entity, to execute the filing instrument.

Date:	December 11, 2012	ا ني	
		Video Plus, L.P.	
	;	Merging Entity Name	
))		
		Signspore of authorized person (see instructions)	_
		Printed or typed name of authorized person	
		Printed or typed name of authorized person	
		VPI Holding Co. Merging Entity Name	
	•	/	
		Signature of authorized person (see instructions)	
		GOE O'CONNOR CFO	
		Printed or typed name of authorized person	_
4			
	•	Merging Entity Name	_
	•	Signature of authorized person (see instructions)	_
		Printed or typed name of authorized person	
	>		

Form 622

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