

Case No.	Trademark Name:	Application No.	Filing Date:
BRITN.006T	BRITISH NUTRITIONS	85/784629	11/20/2012
BRITN.012T	BRITISH NUTRITIONS WWW.BRITISHNUTRITIONSUSA.COM and Label Design	85/822957	1/14/2013
BRITN.013T	BRITISH NUTRITIONS WWW.BRITISHNUTRITIONSUSA.COM POWER PROTEIN	85/822968	1/14/2013
BRITN.014T	BRITISH NUTRITIONS WWW.BRITISHNUTRITIONSUSA.COM X- TRA MASS	85/822977	1/14/2013
BRITN.015T	BRITISH NUTRITIONS WWW.BRITISHNUTRITIONSUSA.COM X- TRA WHEY (STYLIZED AND/OR DESIGN)	85/822982	1/14/2013

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] MICHELL T DO (949) 760-0404					DOCUMENT NUMBER: 41299500002 FILING NUMBER: 14-7396713677 FILING DATE: 01/24/2014 14:59 IMAGE GENERATED ELECTRONICALLY FOR WEB FILING THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY				
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 USA									
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names									
OR	1a. ORGANIZATION'S NAME British Nutritions LLC				FIRST NAME		MIDDLE NAME		SUFFIX
	1b. INDIVIDUAL'S LAST NAME				FIRST NAME		MIDDLE NAME		SUFFIX
1c. MAILING ADDRESS 9781 Irvine Center Dr.				CITY Irvine		STATE CA	POSTAL CODE 92618	COUNTRY USA	
1d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO			1e. TYPE OF ORGANIZATION Limited Liability Company	1f. JURISDICTION OF ORGANIZATION CA	1g. ORGANIZATIONAL ID#, if any <input checked="" type="checkbox"/> NONE			
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names									
OR	2a. ORGANIZATION'S NAME				FIRST NAME		MIDDLE NAME		SUFFIX
	2b. INDIVIDUAL'S LAST NAME				FIRST NAME		MIDDLE NAME		SUFFIX
2c. MAILING ADDRESS				CITY		STATE	POSTAL CODE	COUNTRY	
2d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO			2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE			
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)									
OR	3a. ORGANIZATION'S NAME Knobbe, Martens, Olson & Bear, LLP				FIRST NAME		MIDDLE NAME		SUFFIX
	3b. INDIVIDUAL'S LAST NAME				FIRST NAME		MIDDLE NAME		SUFFIX
3c. MAILING ADDRESS 2040 Main St., 14th Floor				CITY Irvine		STATE CA	POSTAL CODE 92614	COUNTRY USA	
4. This FINANCING STATEMENT covers the following collateral: See Attachment(s)									
5. ALT DESIGNATION: <input type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING									
<input type="checkbox"/> 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]					7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2				
8. OPTIONAL FILER REFERENCE DATA BRITN - UCC1									

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All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorneys' fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

U.S. Trademark & Trademark Applications

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85/784629	11/20/2012	
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