

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM319653

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
MerchSource, LLC		10/27/2011	LIMITED LIABILITY COMPANY: CALIFORNIA
RECEIVING PARTY DATA			
Name:	MS Ventures, LLC		
Street Address:	19517 Pauling		
City:	Foothill Ranch		
State/Country:	CALIFORNIA		
Postal Code:	92610		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3473563	BLUE HAT TOY COMPANY	
CORRESPONDENCE DATA			
Fax Number:	8183324205		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
Phone:	8184888141		
Email:	TMDocketing@eclipsegrp.com		
Correspondent Name:	Jennifer H. Hamilton		
Address Line 1:	The Eclipse Group LLP		
Address Line 2:	6345 Balboa Blvd., Bldg. IV, Suite 190		
Address Line 4:	Encino, CALIFORNIA 91316		
ATTORNEY DOCKET NUMBER:	MS14003USUTM		
NAME OF SUBMITTER:	Jennifer H. Hamilton		
SIGNATURE:	/Jennifer H. Hamilton/		
DATE SIGNED:	10/09/2014		
Total Attachments: 2			
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source=Name_Chng_MS_CA_MS_Vent#page2.tif			

CH \$40.00 3473563



**State of California
Secretary of State**

**LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT**

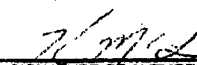
A \$30.00 filing fee must accompany this form.

IMPORTANT – Read instructions before completing this form.

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

OCT 27 2011

This Space For Filing Use Only

1. SECRETARY OF STATE FILE NUMBER 200202510174	2. NAME OF LIMITED LIABILITY COMPANY Merchsource, LLC
3. COMPLETE ONLY THE SECTIONS WHERE INFORMATION IS BEING CHANGED. ADDITIONAL PAGES MAY BE ATTACHED IF NECESSARY. A. LIMITED LIABILITY COMPANY NAME (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY," "LTD. LIABILITY CO." OR THE ABBREVIATIONS "LLC" OR "L.L.C.") MS Ventures, LLC B. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONE): <input type="checkbox"/> ONE MANAGER <input checked="" type="checkbox"/> MORE THAN ONE MANAGER <input type="checkbox"/> ALL LIMITED LIABILITY COMPANY MEMBER(S) C. AMENDMENT TO TEXT OF THE ARTICLES OF ORGANIZATION: D. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE. OTHER MATTERS MAY INCLUDE A CHANGE IN THE LATEST DATE ON WHICH THE LIMITED LIABILITY COMPANY IS TO DISSOLVE OR ANY CHANGE IN THE EVENTS THAT WILL CAUSE THE DISSOLUTION.	
4. FUTURE EFFECTIVE DATE, IF ANY: MONTH DAY YEAR	
6. NUMBER OF PAGES ATTACHED, IF ANY: - 0 -	
8. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.  SIGNATURE OF AUTHORIZED PERSON October 27, 2011 DATE Kirk McLean, President, Ripple Ventures, Inc., Member TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
7. RETURN TO: NAME Regina Braman FIRM O'Melveny & Myers LLP ADDRESS 610 Newport Center Drive, Suite 1700 CITY/STATE Newport Beach, CA 92660 ZIP CODE	



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.

OCT 27 2011

Date: _____

Debra Bowen
DEBRA BOWEN, Secretary of State