

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM333376

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT OF THE ENTIRE INTEREST AND THE GOODWILL		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Shape Medical Weight Loss Center, LLC		11/04/2014	LIMITED LIABILITY COMPANY: GEORGIA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Life Time Fitness, Inc.		
<b>Street Address:</b>	2902 Corporate Place		
<b>City:</b>	Chanhassen		
<b>State/Country:</b>	MINNESOTA		
<b>Postal Code:</b>	55317		
<b>Entity Type:</b>	CORPORATION: MINNESOTA		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4537159	SHAPE MEDICAL	
<b>Registration Number:</b>	4537158	SHAPE WELLNESS CENTER	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	6127661600		
<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>			
<b>Phone:</b>	6127667000		
<b>Email:</b>	tmmpls@faegrebd.com		
<b>Correspondent Name:</b>	Jim Steffen/Sarah House		
<b>Address Line 1:</b>	90 South Seventh Street		
<b>Address Line 2:</b>	2200 Wells Fargo Center		
<b>Address Line 4:</b>	Minneapolis, MINNESOTA 55402		
<b>ATTORNEY DOCKET NUMBER:</b>	454192.32		
<b>NAME OF SUBMITTER:</b>	Sarah M. House		
<b>SIGNATURE:</b>	/Sarah M House/		
<b>DATE SIGNED:</b>	02/26/2015		
<b>Total Attachments: 3</b>			
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source=ShapeMed assignment#page2.tif			

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**ASSIGNMENT OF TRADEMARKS**

This Assignment is effective the 4th day of November 2014, between Shape Medical Weight Loss Center, LLC, a Georgia limited liability company ("Assignor"), who is the owner of the entire title in the United States trademarks and trademark applications set forth in Appendix A (the "Trademarks") and in the goodwill associated therewith, and Life Time Fitness, Inc., a Minnesota Corporation ("Assignee"), who wants to acquire the entire title in the Trademarks.

THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, Assignor does hereby assign unto Assignee its entire title in and to said Trademarks and all goodwill associated therewith.

This document shall be construed, interpreted and applied in accordance with the laws of the State of Minnesota.

IN WITNESS THEREOF, the parties have caused their respective corporate names to be affixed hereto and this instrument to be signed by their duly authorized officers as of the date written below.

**LIFE TIME FITNESS, INC.**

By: 

Name: Eric J. Buss

Its: EVP & CFO

Date: November 4, 2014

**SHAPE MEDICAL WEIGHT LOSS CENTER, LLC**

By: \_\_\_\_\_

Name: \_\_\_\_\_

Its: \_\_\_\_\_

Date: \_\_\_\_\_

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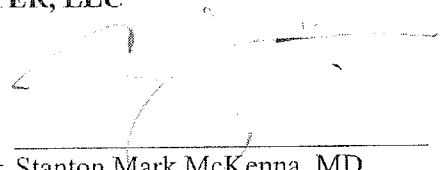
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**LIFE TIME FITNESS, INC.**

By: \_\_\_\_\_  
Name: \_\_\_\_\_  
Its: \_\_\_\_\_  
Date: \_\_\_\_\_

**SHAPE MEDICAL WEIGHT LOSS  
CENTER, LLC**

By:  \_\_\_\_\_  
Name: Stanton Mark McKenna, MD  
Its: CEO  
Date: November 4, 2014

APPENDIX A

TRADEMARK	COUNTRY	REG.NO.
SHAPE MEDICAL	U.S.A.	4537159, registered 5/27/14
SHAPE WELLNESS CENTER	U.S.A.	4537158, registered 5/27/14