

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM342538

SUBMISSION TYPE:	RESUBMISSION		
NATURE OF CONVEYANCE:	ASSIGNMENT OF THE ENTIRE INTEREST AND THE GOODWILL		
RESUBMIT DOCUMENT ID:	900323972		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Jenny Shin		05/07/2015	INDIVIDUAL: UNITED STATES
RECEIVING PARTY DATA			
Name:	Mega Distribution Int'l., Inc.		
Street Address:	7322 Madison St.		
City:	Paramount		
State/Country:	CALIFORNIA		
Postal Code:	90723		
Entity Type:	CORPORATION: CALIFORNIA		
PROPERTY NUMBERS Total: 6			
Property Type	Number	Word Mark	
Registration Number:	3739603	CELLSPA	
Registration Number:	3749025	QLIVE	
Registration Number:	3626131	QLIVE	
Registration Number:	3677333	VOLTEX	
Registration Number:	4266523	VOLTEXLIGHTS	
Registration Number:	4235394	NSE	
CORRESPONDENCE DATA			
Fax Number:			
<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:	651-500-7590		
Email:	wsp@NJPLS.com		
Correspondent Name:	Wendy Peterson of Not Just Patents LLC		
Address Line 1:	PO Box 18716		
Address Line 4:	Minneapolis, MINNESOTA 55418		
NAME OF SUBMITTER:	Wendy Peterson		
SIGNATURE:	/Wendy Peterson/		
DATE SIGNED:	05/27/2015		

Total Attachments: 12

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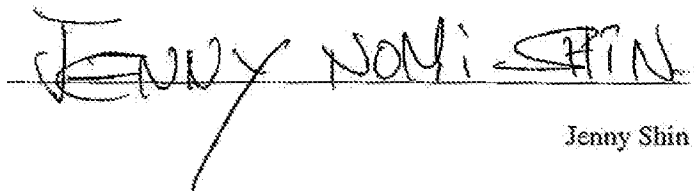
ASSIGNMENT OF INTEREST

David Shin (deceased) of 7322 Madison St. Paramount, CA 90723 by Jenny Shin (executor and successor trustee of the Shin Family Revocable Trust) hereby assigns all right, title and interest in the following trademarks and trade names, including but not limited to, the federal registrations for these marks/names, the goodwill associated with these marks/names, all claims for infringement of these marks/names, and all damages and other remedies for all such claims, including the trademarks CellSpa RN 3739603, QLive RN 3749025, QLive RN 3626131, Voltex RN 3677333, Voltexlights RN 4266523, and NSE RN 4235394 to Mega Distribution Int'l Inc., 7322 Madison St. Paramount, CA 90723 effective May 2, 2015 when the successor business entity Mega Distribution Int'l Inc. was established in the state of California.

VERIFICATION FROM OFFICER, OWNER

I, Jenny Shin, declare that I am authorized to sign this verification of the assignment on behalf of my deceased husband David Shin. I declare further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code.

Executed this 7 day of May 2015 in Paramount, CA


Jenny Shin

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH

3052013134572		CERTIFICATE OF DEATH			3201319030359
STATE FILE NUMBER		DATE OF DEATH		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEASED - FIRST (Last)		2. MIDDLE		3. LAST (Family)	
DAVID		DONG		SHIN	
4. AKA ALSO KNOWN AS - include (Last, First, Middle, Last)					
DONG T. SHIN					
5. DATE OF BIRTH: month/day		6. AGE Yrs.		7. GENDER: Male Female	
01/20/1948		65		M	
8. BIRTH STATE/FOREIGN COUNTRY		9. SOCIAL SECURITY NUMBER		10. EVER IN U.S. ARMED FORCES?	
KOREA		564-77-5237		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
11. MARRIAGE STATUS - (if less than 1 year)		12. DATE OF DEATH: month/day		13. HOUR (24 Hour)	
MARRIED		07/15/2013		0130	
14. DECEASED'S RACE - List to 3 race (may be listed as Alphabetical order)					
KOREAN					
15. OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		16. KIND OF BUSINESS OR INDUSTRY (e.g., primary occupation, construction, hospital, nursing, etc.)		17. YEARS IN OCCUPATION	
OWNER		INTERNATIONAL TRADING		30	
18. DECEASED'S RESIDENCE (street, non-numbered, or P.O. box)					
2041 S. MCSPADEN CT.					
19. CITY		20. COUNTY/TOWNSHIP		21. STATE/FOREIGN COUNTRY	
LA HABRA		GRANGE		CA	
22. ZIP CODE		23. YEARS IN COUNTY		24. YEARS IN COUNTRY	
90631		30		30	
25. INFORMANT'S NAME, RELATIONSHIP					
JENNY NOMI SHIN, WIFE					
26. DECEASED'S MAILED ADDRESS (street and number, or post office number, city of issue, state and zip)					
2041 S. MCSPADEN CT., LA HABRA, CA 90631					
27. NAME OF SURVIVING SPOUSE/SPOUSE-TO-BE		28. MIDDLE		29. LAST (GIVEN NAME)	
JENNY		NGMI		KIM	
30. NAME OF FATHER/PARENT-FIRST		31. MIDDLE		32. LAST	
UNK		UNK		SHIN	
33. NAME OF MOTHER/PARENT-FIRST		34. MIDDLE		35. LAST (GIVEN NAME)	
YOUNG HEE		OH		SH	
36. DATE OF DEATH		37. PLACE OF FINAL DISPOSITION			
07/19/2013		AT SEA OFF THE COAST LOS ANGELES COUNTY			
38. TYPE OF DISPOSITION					
CR/SEA					
39. NAME OF FUNERAL ESTABLISHMENT		40. SIGNATURE OF BURIAL CLERK		41. LICENSE NUMBER	
HAN KOOK MORTUARY-NORWALK & CERRITOS		VIRGIL GILBERT		EMB7615	
42. LICENSE NUMBER		43. SIGNATURE OF LOCAL REGISTRAR		44. DATE: month/day	
FD1134		JONATHAN FIELDING, MD		07/17/2013	
45. PLACE OF DEATH					
KAISER FOUNDATION HOSPITAL					
46. COUNTY		47. CITY		48. ZIP CODE	
LOS ANGELES		DOWNEY		90242	
49. CAUSE OF DEATH					
I. SEVERE PANCYTOPENIA					
II. MYELODYSPLASIA					
158. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 157					
NONE					
159. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 158? (Yes, No, Unk, or Not Applicable)					
NO					
160. COPY SENT TO THE DEPT. OF HEALTH SERVICES (CALIFORNIA) AT THE HOUR, DATE, AND PLACE STATED FROM THE CALIFORNIA DEPARTMENT OF HEALTH SERVICES					
161. REGISTRAR'S SIGNATURE		162. DATE		163. LICENSE NUMBER	
Jonathan E. Fielding MD		07/15/2013		G65862	
164. TYPE ATENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE					
TIMOTHY HICKEY, M.D.					
165. TYPE ATENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE					
TIMOTHY HICKEY, M.D.					
166. MANNER OF DEATH: (Natural, Accident, Homicide, Suicide, Pending Investigation, Could not be determined)					
Natural					
167. PLACE OF INJURY (e.g., home, residential care, wooded area, etc.)					
168. DESCRIBE HOW INJURY OCCURRED (events which resulted in injury)					
169. LOCATION OF INJURY (street and number, or words, and city, and zip)					
170. SIGNATURE OF CORONER/DEPUTY CORONER					
171. RATE					
172. TYPE (NAME, TITLE OF CORONER/DEPUTY CORONER)					
173. SIGNATURE OF CORONER/DEPUTY CORONER					
174. RATE					
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297. RATE					
298. TYPE (NAME, TITLE OF CORONER/DEPUTY CORONER)					
299. SIGNATURE OF CORONER/DEPUTY CORONER					
300. RATE					

This is a true certified copy if the record filed in the County of Los Angeles, Department of Public Health if it bears the Registrar's signature in purple ink.

Jonathan E. Fielding MD
 VB
 DATE ISSUED

JUL 25th 2013 310302*

Director of Public Health and Registrar

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

FRANCO 007/09/11

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



TRADEMARK
REEL: 005523 FRAME: 0605

LAST WILL OF
DAVID D. SHIN

I, David D. Shin, also known as David Dong Shin, a resident of Orange County, California, declare that this is my will. I hereby revoke all my previous wills and codicils.

ARTICLE ONE
INTRODUCTORY PROVISIONS

1.1. Marital Status. I am married to Jenny N. M. Shin, and all references in this will to "my wife" are to her.

1.2. Identification of Living Children. I have two living children, as follows:

<u>Name</u>	<u>Date of Birth</u>
SANG HOON SHIN	10/20/1973
CHRISTOPHER CHANG MIN SHIN	7/4/1975

1.3. No Deceased Children. I have no deceased children.

1.4. No Contract Affecting Will. I have not entered into any contract to make a will or a testamentary gift, not to revoke a will or a testamentary gift, or to die intestate.

1.5. No Exercise of Power of Appointment. I intentionally refrain from exercising any power of appointment that I now possess or that hereafter may be conferred on me.

ARTICLE TWO
GIFT OF ENTIRE ESTATE

2.1. Gift of Entire Estate. I give all of my property to the trustee of the SHIN FAMILY REVOCABLE TRUST, created under the declaration of trust executed on the same date as, but immediately before, the execution of this will, by David D. Shin and Jenny N. M. Shin as settlors and trustees. The trustee of that trust shall add the property disposed of under this will to the

trust principal and hold, administer, and distribute the property in accordance with the provisions of that declaration of trust, including any amendments of that declaration of trust that have been made before or after execution of this will.

ARTICLE THREE

RESIDUARY PROVISIONS

3.1. Disposition of Residue. If the SHIN FAMILY REVOCABLE TRUST has been revoked, terminated, or declared invalid for any reason, I give the residue of my estate to the executor of this will, as trustee, who shall hold, administer, and distribute the property under a testamentary trust, the terms of which shall be identical to the terms of the SHIN FAMILY REVOCABLE TRUST that are in effect on the date of execution of this will or such later date on which this will is republished.

ARTICLE FOUR

EXECUTOR

4.1. Nomination of Executor. I nominate my wife as executor of this will.

4.2. Successor Executors. If my wife is unable (by reason of death, incapacity, or any other reason) or unwilling to serve as executor, or if at any time the office of executor becomes vacant, by reason of death, incapacity, or any other reason, and no successor executor or coexecutors have been designated under any other provision of this will, I nominate the following, in the order of priority indicated, as executor:

First, **SANG HOON SHIN**, my son;

Second, **CHRISTOPHER CHANG MIN SHIN**, my son.

If all those named above are unwilling or unable to serve as successor executor, a new executor or coexecutors shall be appointed by the court.

4.3. Waiver of Bond. No bond or undertaking shall be required of any executor

nominated in this will.

4.4. General Powers of Executor. The executor shall have full authority to administer my estate under the California Independent Administration of Estates Act. The executor shall have all powers now or hereafter conferred on executors by law, except as otherwise specifically provided in this will, including any powers enumerated in this will.

4.5. Power to Invest. The executor shall have the power to invest estate funds in any kind of real or personal property, as the executor deems advisable.

4.6. Division or Distribution in Cash or in Kind. In order to satisfy a pecuniary gift or to distribute or divide estate assets into shares or partial shares, the executor may distribute or divide those assets in kind, or divide undivided interests in those assets, or sell all or any part of those assets and distribute or divide the property in cash, in kind, or partly in cash and partly in kind. Property distributed to satisfy a pecuniary gift under this will shall be valued at its fair market value at the time of distribution. This section shall apply only to the extent that it does not conflict with the provisions of the SHIN FAMILY REVOCABLE TRUST.

4.7. Power to Sell, Lease, and Grant Options to Purchase Property. The executor shall have the power to sell, at either public or private sale and with or without notice, lease, and grant options to purchase any real or personal property belonging to my estate, on such terms and conditions as the executor determines to be in the best interest of my estate.

4.8. Payments to Legally Incapacitated Persons. If at any time any beneficiary under this will is a minor or it appears to the executor that any beneficiary is incapacitated, incompetent, or for any other reason not able to receive payments or make intelligent or responsible use of the payments, then the executor, in lieu of making direct payments to the beneficiary, may make payments to the beneficiary's conservator or guardian; to the beneficiary's custodian under the Uniform Gifts to Minors Act or Uniform Transfers to Minors Act of any state; to the beneficiary's custodian under the California Uniform Transfers to Minors Act until the beneficiary reaches the age of twenty-five (25); to one or more suitable persons, as the

executor deems proper, such as a relative or a person residing with the beneficiary, to be used for the benefit of the beneficiary; to any other person, firm, or agency for services rendered or to be rendered for the beneficiary's assistance or benefit; or to accounts in the beneficiary's name with financial institutions. If there is no custodian then-serving or nominated to serve by me for a beneficiary, the personal representative or executor, as the case may be, shall designate the custodian. The receipt of payments by any of the foregoing shall constitute a sufficient acquittance of the executor for all purposes.

ARTICLE FIVE
CONCLUDING PROVISIONS

5.1. Definition of Death Taxes. The term "death taxes," as used in this will, shall mean all inheritance, estate, succession, and other similar taxes that are payable by any person on account of that person's interest in my estate or by reason of my death, including penalties and interest, but excluding the following:

(a) Any additional tax that may be assessed under Internal Revenue Code Section 2032A.

(b) Any federal or state tax imposed on a "generation-skipping transfer," as that term is defined in the federal tax laws, unless the applicable tax statutes provide that the generation-skipping transfer tax on that transfer is payable directly out of the assets of my gross estate.

5.2. Payment of Death Taxes. Pursuant to the declaration of trust executed on the same date as, but immediately before, the execution of this will by David D. Shin and Jenny N. M. Shin as settlors and trustees, all death taxes, whether or not attributable to property inventoried in my probate estate, shall be paid by the trustee from that trust. If that trust does not exist at the time of my death, or if the assets of that trust are insufficient to pay the death taxes in full, I direct the executor to pay any death taxes, whether or not attributable to property inventoried in my probate estate, that cannot be paid by the trustee, by prorating and apportioning those taxes among the persons interested in my estate, as provided in the

California Probate Code; however, any death taxes attributable to any property passing to my wife under this will or otherwise that qualifies for the federal estate tax marital deduction shall be paid pro rata out of property passing under this will or otherwise that does not qualify for the federal estate tax marital deduction, so that the property qualifying for the federal estate tax marital deduction shall pass to my wife free of any death taxes.

5.3. Simultaneous Death. If any beneficiary under this will and I die simultaneously, or if it cannot be established by clear and convincing evidence whether that beneficiary or I died first, I shall be deemed to have survived that beneficiary, and this will shall be construed accordingly.

5.4. Period of Survivorship. For the purposes of this will, a beneficiary shall not be deemed to have survived me if that beneficiary dies within SIX MONTHS after my death.

5.5. Intentional Omission of Children Born or Adopted After Execution of Will. Except as otherwise provided in this will, I have intentionally failed to provide in this will for any children born to or adopted by me after the execution of this will.

5.6. No-Contest Clause. If any person, directly or indirectly, contests the validity of this will in whole or in part, or opposes, objects to, or seeks to invalidate any of its provisions, or seeks to succeed to any part of my estate otherwise than in the manner specified in this will, any gift or other interest given to that person under this will shall be revoked and shall be disposed of as if he or she had predeceased me without issue.

5.7. Definition of Incapacity.

(a) For purposes of this will, a person is deemed "incapacitated" or deemed to suffer from "incapacity" if any of the following circumstances apply:

(1) The person is unable, in the executor's judgment, to provide properly for that person's own needs for physical health, food, clothing, or shelter; to manage substantially that person's own financial resources; or to resist fraud or undue influence.

(2) Either a medical doctor, board-certified neuropsychologist, or a board-certified psychiatrist, not related by blood or marriage to any executor or beneficiary, examines such person and declares under penalty of perjury that such person is either temporarily or permanently incapacitated, according to generally accepted medical definitions.

(3) The person is operating under a legal disability, such as a duly established conservatorship.

(4) The court makes a finding that the person is either temporarily or permanently incapacitated under the criteria set forth in Prob. Code Section 810 et seq.

(b) In case of temporary incapacity of a sole executor, the successor executor designated under this will shall serve during the period of temporary incapacity as though he or she were the only executor. In case of temporary incapacity of a coexecutor, the other coexecutor shall make any and all decisions during the period of temporary incapacity as though that coexecutor were the only executor.

(c) Any executor deemed to be temporarily incapacitated shall be deemed to be permanently incapacitated 90 days after the determination of temporary incapacity unless a determination of capacity is made within that 90-day period. If a determination of capacity is made, the executor may resume serving as executor. If there is a subsequent determination of incapacity, the executor has another 90-day period to obtain a determination of capacity.

(d) Any successor executor or coexecutor serving in place of a temporarily incapacitated executor shall not be relieved of liability until that executor's account has been settled or an account has been waived by a majority of all current beneficiaries of the estate.

(e) If any executor or any beneficiary whose capacity is in question disputes the determination of incapacity under any of the standards listed above, such person may petition the court for a finding regarding that person's capacity. The court's finding shall be conclusive. If the court determines that the executor or other person whose capacity is in question has capacity, the estate property shall bear all expenses associated with the examination or court proceeding. If the court sustains the determination of incapacity, the individual challenging the determination of incapacity shall bear all expenses of the examination or court proceeding.

(f) Each individual executor agrees to cooperate in any examination reasonably necessary for the purpose of determining capacity, agrees to waive the doctor-patient privilege in respect to the results of such examination, and agrees to provide written authorization in compliance with the privacy regulations under the Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. Section 1320d) and the provisions of California Civil Code Section 56.10 for the disclosure and use of that executor's health information and medical records to the extent that such disclosure and use are necessary to make a determination of the executor's capacity. Refusal to submit to the examination, to provide the waiver, or to provide the written authorization when requested by the successor executor and the current beneficiaries of the estate shall be deemed a resignation by that executor.

5.8. Number and Gender. As used in this will, references in the masculine gender shall

be deemed to include the feminine and neuter gender, and vice versa, and references to the singular shall be deemed to include the plural, and vice versa, wherever the context so permits.

5.9. Captions. The captions appearing in this will are for convenience of reference only, and shall be disregarded in determining the meaning and effect of the provisions of this will.

5.10. Severability Clause. If any provision of this will is invalid, that provision shall be disregarded, and the remainder of this will shall be construed as if the invalid provision had not been included.

5.11. California Law to Apply. All questions concerning the validity and interpretation of this will, including any trusts created by this will, shall be governed by the laws of the State of California in effect at the time this will is executed.

Executed on 01/17/09 at WESTMINSTER

California.



David D. Shin

On the date written above, we, the undersigned, each being present at the same time, witnessed the signing of this instrument by David D. Shin, who declared to us that this instrument was the will of David D. Shin. At that time, David D. Shin appeared to us to be of sound mind and memory and, to the best of our knowledge, was not acting under fraud, duress, menace, or undue influence. Understanding this instrument, which consists of eight (8) pages, including the pages on which the signature of David D. Shin and our signatures appear, to be the will of David D. Shin, we subscribe our names as witnesses thereto.

We declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on January 17, 2009 at Westminster, California.

[Signature] residing at _____
Witness (Allan Sesto) Street Address

ANY COPY OF ALLAN MC NAY, INC.
1100 W. BEACONHILL AVE.
WESTMINSTER CA 92683

_____, California
City

[Signature] residing at _____
Witness (Jeannie McCoy) Street Address

JEANNIE MCCOY
1100 EUCLID AVE.
LONG BEACH, CA 90804

_____, California
City

Law Offices of Allan M. Soto, Inc.
7960 W. McFadden Avenue
Westminster, CA 92683
(714) 899-9671
Facsimile (714) 899-9672

NOTICE AND INSTRUCTIONS FOR TITLE DESIGNATION OF VARIOUS ASSETS

1. All assets to be held by the Trust should be designated as:

**David D. Shin and Jenny N. M. Shin TRUSTEES OF THE SHIN FAMILY
REVOCABLE TRUST** dated 1/17/09.

2. Types of assets to be presently transferred are:

- | | |
|----------------|-------------------------------|
| a. Real Estate | d. Partnership interests |
| b. Stocks | e. Bank Accounts (except IRA) |
| c. Bonds | f. Safe Deposit Boxes |

3. Beneficiary Designations:

3.1. Life Insurance Policies (except Life Insurance Policies purchased through Qualified Employee Benefit Plans or IRA accounts) should be designated as:

**David D. Shin and Jenny N. M. Shin TRUSTEES OF THE SHIN FAMILY
REVOCABLE TRUST** dated 1/17/09.

3.2. Qualified Employee Benefit Plans and IRA accounts requires the evaluation of a complex mix of income tax, estate tax and non-tax issues which should be considered before designating beneficiaries. Please discuss these issues with our office or your Pension Plan Administrator.

4. Please check with me before you take title to property in any manner except as directed above.

Sincerely yours,

Allan M. Soto, Esq.

TRADEMARK

REEL: 005523 FRAME: 0614

* For income tax purposes, **THE SHIN FAMILY REVOCABLE TRUST** is a "Revocable Living Grantor Trust." and the Social Security numbers of the Settlers should be used as the Tax Identification Number.

NOTICE AND RECEIPT OF INSTRUCTIONS

We hereby understand and acknowledge receipt of these instructions. We also acknowledge the following:

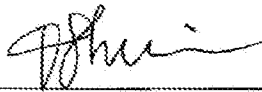
The Law Offices of Allan M. Soto, Inc. strongly recommends that your estate planning instruments should be reviewed by our office or another qualified law office at least every five (5) years if not sooner from the date of your executed estate planning instruments. The Law Offices of Allan M. Soto, Inc. cannot warrant the legality of your estate planning instruments for a period longer than five (5) years and the Law Offices of Allan M. Soto, Inc.'s responsibility shall conclude within five (5) years of the execution of your estate planning instruments.

We also understand that it is our obligation to arrange to change title for items 2(a) through 2(f) and any other assets that we may acquire or wish to add to our trust from our individual names to:

**David D. Shin and Jenny N. M. Shin TRUSTEES OF THE SHIN FAMILY
REVOCABLE TRUST** dated 1/17/09.

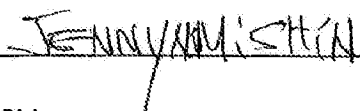
RECEIPT ACKNOWLEDGED:

DATED: 01/17/09



David D. Shin

DATED: 01/17/09



Jenny N. M. Shin