

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM355930

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	MERGER		
<b>EFFECTIVE DATE:</b>	12/31/2012		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
BPONG, LLC		12/21/2012	LIMITED LIABILITY COMPANY: ILLINOIS
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	BPONG, LLC		
<b>Street Address:</b>	PO Box 81886		
<b>City:</b>	Las Vegas		
<b>State/Country:</b>	NEVADA		
<b>Postal Code:</b>	89180		
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: NEVADA		
<b>PROPERTY NUMBERS Total: 7</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4601824	NBPL	
<b>Registration Number:</b>	4011387		
<b>Registration Number:</b>	3201910		
<b>Registration Number:</b>	3523466	BPONG	
<b>Registration Number:</b>	3497667	BPONG.COM	
<b>Registration Number:</b>	3688010	BPONG	
<b>Registration Number:</b>	3281681	SINK IT. DRINK IT.	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	8888455815		
<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>	702-825-1360		
<b>Email:</b>	billy@bpong.com		
<b>Correspondent Name:</b>	William R. Gaines, II		
<b>Address Line 1:</b>	PO Box 81886		
<b>Address Line 4:</b>	Las Vegas, NEVADA 89180		
<b>NAME OF SUBMITTER:</b>	William R. Gaines, II		
<b>SIGNATURE:</b>	/William R. Gaines, II/		

OP \$190.00 4601824

<b>DATE SIGNED:</b>	09/22/2015
<b>Total Attachments: 2</b> source=2012-12-31 - IL Articles of Merger#page1.tif source=2012-12-31 - IL Articles of Merger#page2.tif	

Form **LLC-37.25**  
May 2012

Secretary of State  
Department of Business Services  
Limited Liability Division  
501 S. Second St., Rm. 351  
Springfield, IL 62756  
217-524-8008  
www.cyberdriveillinois.com

Payment may be made by check  
payable to Secretary of State. If  
check is returned for any reason this  
filing will be void.

Illinois  
Limited Liability Company Act  
**Articles of Merger**

**SUBMIT IN DUPLICATE**

Type or print clearly.

Filing Fee: \$ 100.00  
(Filing fee \$100 plus \$50 each entity  
more than two)

Approved: *[Signature]*

FILE # 019 0 3691  
This space for use by Secretary of State.

**FILED**  
**DEC 11 2012**  
JESSE WHITE  
SECRETARY OF STATE

1. Names of Entities proposing to merge:

Name of Entity	Type of Entity (Corporation, * Limited Liability Company, Limited Partnership, General Partnership or other permitted entity)	Domestic State or Country	Date of Organization on Admission to Illinois	Illinois Secretary of State File Number (if any)
<u>BPONG, LLC</u>	<u>LLC</u>	<u>Illinois</u>	<u>7/1/06</u>	<u>01903691</u>
<u>BPONG LLC</u>	<u>LLC</u>	<u>Nevada</u>	<u>n/a</u>	<u>n/a</u>

\* If a corporation is a party to the merger, a copy of the plan as approved is attached to these Articles of Merger.

2. a. Name of Surviving Entity: BPONG LLC *(NEVADA)*

b. Address of Surviving Entity: PO Box 29502 #32470, Las Vegas, NV 89126

3. Effective date of merger: (check one)  
a.  the filing date, or  
b.  a later date, but not more than 30 days subsequent to the filing date: December 31, 2012  
Month, Day, Year

4. If the survivor is a Limited Liability Company, indicate changes that are necessary to its Articles of Organization by reason of this merger:

LLC-37.25

If the surviving entity is not a Limited Liability Company, the entity agrees that it may be served with process in Illinois and is subject to liability in any action or proceeding for the enforcement of any liability or obligation of a Limited Liability Company previously subject to suit in this State, which is to merge, and for the enforcement, as provided in this Act, of the right of members of any Limited Liability Company to receive payment for their interest against the surviving entity.

5. Each LLC or other entity that is party to this Merger has signed below and affirms, under penalty of perjury, that the facts stated herein are true, correct and complete.

Dated December 21, 2012  
Month & Day Year

1. William R. Gaines II  
Signature  
William R. Gaines II, Manager  
Name and Title (type or print)  
40mm Holdings, LLC, Sole Member of BPONG, LLC  
Name if a Corporation or other Entity

2. William R. Gaines II  
Signature  
William R. Gaines II, Manager  
Name and Title (type or print)  
40mm Holdings, LLC, Sole Member of BPONG, LLC  
Name if a Corporation or other Entity

3. \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Name and Title (type or print)  
\_\_\_\_\_  
Name if a Corporation or other Entity

4. \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Name and Title (type or print)  
\_\_\_\_\_  
Name if a Corporation or other Entity

If more space is needed, please attach additional sheets of this size.

**Signatures must be in black ink on an original document.  
Carbon copy, photocopy or rubber stamp signatures  
may only be used on conformed copies.**