# CH \$40.00 39981

#### TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM359414

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE: Ef	ENTITY CONVERSION

#### **CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Vapor Corp.		07/23/2010	CORPORATION: NEVADA

#### **RECEIVING PARTY DATA**

Name:	VAPOR CORP
Street Address:	3001 GRIFFIN RD
City:	Dania Beach
State/Country:	FLORIDA
Postal Code:	33312
Entity Type:	CORPORATION: DELAWARE

#### **PROPERTY NUMBERS Total: 1**

Property Type	Number	Word Mark
Registration Number:	3998191	VAPORMAX

#### **CORRESPONDENCE DATA**

**Fax Number:** 9545226507

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.

**Phone:** 954-763-3303

Email: info@mhdpatents.com
Correspondent Name: Geoffrey Lottenberg
Address Line 1: 1936 S. Andrews Avenue

Address Line 4: Fort Lauderdale, FLORIDA 33316

ATTORNEY DOCKET NUMBER:	12320.9712
NAME OF SUBMITTER:	Geoffrey Lottenberg
SIGNATURE:	/geoffrey lottenberg/
DATE SIGNED:	10/21/2015

#### **Total Attachments: 4**

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> TRADEMARK REEL: 005649 FRAME: 0731

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(F	Requestor's Name)	
(/	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
([	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	to Filing Officer:	
	Office Use Only	



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**REEL: 005649 FRAME: 0732** 

#### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Va por Corp.  Name of Corporation
DOCUMENT NUMBER: F1000000 3385
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Harlan PRESS Name of Contact Person
Vapor Corp. Firm/Company
3001 GRIFFIN Road Address
Dania Beach, Fl 33312.  City/State and Zip Code
E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
Harlan Press at (305) 749 - 2676 ox + 218 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status  \$43.75 Filing Fee & Certificate of Status  \$43.75 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certificate Copy (Additional copy is enclosed)
Mailing Address:  Street Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

**TRADEMARK REEL: 005649 FRAME: 0733** 

### PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDME APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLO

(Pursuant to s. 607.1504, F.S.)

	(1 distant to 3. 007, 1504, 1.5.)
	SECTION I (1-3 MUST BE COMPLETED)
	F 1 00000 33 8 5  (Document number of corporation (if known)
1.	(Name of corporation as it appears on the records of the Department of State)
2.	(Incorporated under laws of)  3. O1. 53.50.0 (Date authorized to do business in Florida
	SECTION II (4-7 complete only the applicable changes)
4.	If the amendment changes the name of the corporation, when was the change effected under the laws its jurisdiction of incorporation?
5. <u>.</u>	(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated appropriate abbreviation, if not contained in new name of the corporation)
ĺ	(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of trans- business in Florida)
6.	If the amendment changes the period of duration, indicate new period of duration.
7	(New duration)  If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.
,.	Delaware (New jurisdiction)
8.	Attached is a certificate or document of similar import, evidencing the amendment, authenticated not 90 days prior to delivery of the application to the Department of State, by the Secretary of State or oth having custody of corporate records in the jurisdiction under the laws of which it is incorporated.
_	(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
-	Harlon PRESS CFO (Typed or printed name of person signing) (Title of person signing)

TRADEMARK REEL: 005649 FRAME: 0734

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VAPOR CORP." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF AUGUST, A.D.

2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VAPOR CORP."

WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF DECEMBER, A.D.

2013.

5455438 8300

141097188

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTICATION: 1639374

DATE: 08-21-14

TRADEMARK REEL: 005649 FRAME: 0735

RDED: 10/21/2015