

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM393838

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
SEQUENCE:	4		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
INTEGRATED SECURITY SYSTEMS, INC.		06/29/2012	Corporation: DELAWARE
RECEIVING PARTY DATA			
Name:	ISATORI, INC.		
Street Address:	15000 W. 6th Avenue, Suite 202		
City:	Golden		
State/Country:	COLORADO		
Postal Code:	80401		
Entity Type:	Corporation: DELAWARE		
PROPERTY NUMBERS Total: 6			
Property Type	Number	Word Mark	
Registration Number:	3124281	EAT SMART	
Registration Number:	3523821	911 ULTIMATE TRANSFORMATION CHALLENGE	
Registration Number:	3941041	MORPH	
Registration Number:	3916857	SUB-TEST	
Registration Number:	3909869	AMINO-PHASE	
Registration Number:	4386209	PWR	
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:	(402) 341-3070		
Email:	trademark@mcgrathnorth.com		
Correspondent Name:	Tracy L. Deutmeyer		
Address Line 1:	1601 Dodge Street, Suite 3700		
Address Line 4:	Omaha, NEBRASKA 68102		
NAME OF SUBMITTER:	Tracy L. Deutmeyer		
SIGNATURE:	/Tracy L. Deutmeyer/		
DATE SIGNED:	08/04/2016		

OP \$165.00 3124281

Total Attachments: 2

source=20121355667 (1) ISSI to IINC#page1.tif

source=20121355667 (1) ISSI to IINC#page2.tif

Document processing fee
If document is filed on paper \$10.00
If document is filed electronically Currently Not Available

20121355667
\$10.00
SECRETARY OF STATE
06/29/2012 11:08:04

Fees & forms/cover sheets
are subject to change.
To file electronically, access instructions
for this form/cover sheet and other
information or print copies of filed
documents, visit www.sos.state.co.us
and select Business.

Paper documents must be typewritten or machine printed.

ABOVE SPACE FOR OFFICE USE ONLY

**Statement of Change Changing Information Other Than Principal Office Address
or Registered Agent Information**

filed pursuant to §7-90-305.5 and, if applicable, §7-90-804 of the Colorado Revised Statutes (C.R.S.)

ID number: 20121184261
1. Entity name: INTEGRATED SECURITY SYSTEMS, INC.
2. True name:
(if different from the entity name) _____

Complete lines 3 - 9 as applicable. You must complete section 10.

3. Document number: 20121184261
(required for change(s) to 4, 5, 6, 7
and/or 8 below)
4. Change of entity name of record (LLP, art. 61 LLLP or foreign entity only):
New entity name: ISATORI, INC.
5. Change of true name of record (LLP, art. 61 LLLP, general partnership or foreign entity only):
New true name: _____
6. Change of jurisdiction of formation of record (foreign entity only):
New jurisdiction of formation: _____
7. Change of entity form of record (foreign entity only):
New entity form: _____

8. Other change(s) not provided for above:

If other information contained in the filed document is being changed, mark this box and include an attachment stating the information to be changed and each such change.

If other information is being added or deleted, mark this box and include an attachment stating each addition or deletion.

9. (Optional) Delayed effective date: _____
(mm/dd/yyyy)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

10. The true name and mailing address of the individual causing this document to be delivered for filing are

Newburn	Ryan		
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>
1550 17th Street, Suite 500			
<i>(Street number and name or Post Office Box information)</i>			
Denver	CO	80202	
<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>	
<i>(Province - if applicable)</i>		<i>(Country)</i>	

(If applicable, adopt the following statement by marking the box and include an attachment.)

This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).