

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM423925

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Capriola Corp.		03/10/2017	Corporation: FLORIDA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Laser Pegs IP Holdings Corp.		
<b>Street Address:</b>	1991 Main Street		
<b>Internal Address:</b>	Suite 227		
<b>City:</b>	Sarasota		
<b>State/Country:</b>	FLORIDA		
<b>Postal Code:</b>	34236		
<b>Entity Type:</b>	Corporation: FLORIDA		
<b>PROPERTY NUMBERS Total: 19</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4064947	3D LITE BOARD	
<b>Serial Number:</b>	87300574	IT'S YOUR IMAGINATION "LIGHT IT UP"	
<b>Registration Number:</b>	4227920	LASER LACES	
<b>Registration Number:</b>	3770530	LASER PEGS	
<b>Registration Number:</b>	4299368	LIGHT IT UP	
<b>Registration Number:</b>	4370081	LP NETWORK	
<b>Registration Number:</b>	4338036	LP NETWORK	
<b>Registration Number:</b>	3313543	MAKING IDEAS A REALITY	
<b>Registration Number:</b>	4446399	MAKING IDEAS A REALITY	
<b>Registration Number:</b>	4712184	MPS	
<b>Registration Number:</b>	4851583	MPS MOBILE POWER SOURCE	
<b>Registration Number:</b>	4511797	RUNNERS	
<b>Registration Number:</b>	4990569	STEM APPROVED SCIENCE TECHNOLOGY ENGINEE	
<b>Registration Number:</b>	4486556	THE ORIGINAL LIGHTED CONSTRUCTION SET	
<b>Registration Number:</b>	4423284	THE ULTIMATE APP FOR KIDS	
<b>Registration Number:</b>	4654473	THE ULTIMATE CONSTRUCTION TOY FOR KIDS	
<b>Registration Number:</b>	4068811	THE ULTIMATE TOY FOR KIDS	
<b>Registration Number:</b>	4140248	WORLD OF BUGS	

OP \$490.00 4064947

Property Type	Number	Word Mark
Registration Number:	4464052	ZIPPY DO
<b>CORRESPONDENCE DATA</b>		
Fax Number:	4078412343	
<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:	407-841-2330	
Email:	dsigalow@addmg.com	
Correspondent Name:	David L. Sigalow	
Address Line 1:	255 S. Orange Avenue	
Address Line 2:	Suite 1401	
Address Line 4:	Orlando, FLORIDA 32801	
NAME OF SUBMITTER:	David L. Sigalow	
SIGNATURE:	/David L. Sigalow/	
DATE SIGNED:	04/17/2017	
<b>Total Attachments: 6</b>		
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source=14H5971#page5.tif		
source=14H5971#page6.tif		

POA 000099907

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

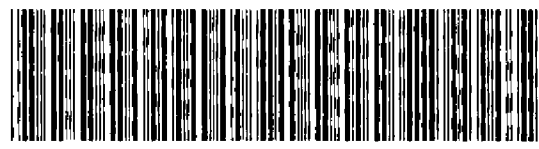
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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MAR 31 2017

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: CAPRJOLA CORP.

DOCUMENT NUMBER: P02000099907

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert H. Thornburg  
Name of Contact Person  
Allen, Dyer, Doppelt & Gilchrist, P.A.  
Firm/ Company  
1221 Brickell Avenue, Suite 2400  
Address  
Miami, FL 33131  
City/ State and Zip Code

rthornburg@allendyer.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert H. Thornburg at ( 305 ) 374-8303  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|---|---|--|--|

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

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

Articles of Amendment  
to  
Articles of Incorporation  
of

17 11 20 11 0:59

CAPRIOLA CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000099907

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Laser Pegs IP Holdings Corp.

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
*(Principal office address **MUST BE A STREET ADDRESS**)*

1991 Main Street, Suite 227

Sarasota, FL 34236

**C. Enter new mailing address, if applicable:**  
*(Mailing address **MAY BE A POST OFFICE BOX**)*

1991 Main Street, Suite 227

Sarasota, FL 34236

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent Robert H. Thornburg

1221 Brickell Avenue, Suite 2400

*(Florida street address)*

New Registered Office Address: Miami, Florida 33131  
*(City) (Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*Signature of New Registered Agent, if changing*

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

Change                    PT      John Doe

Remove                    V      Mike Jones

Add                        SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>CFO</u>	<u>Charissa PUTNAM</u>	<u>1991 Main St</u>
<input checked="" type="checkbox"/> Add			<u>Sarasota, FL 34236</u>
<input type="checkbox"/> Remove			<u>Suite 227</u>
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

**E. If amending or adding additional Articles, enter change(s) here:**  
(Attach additional sheets, if necessary) (Be specific)

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
(if not applicable, indicate N/A)

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March 10, 2017

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).*
  - "The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_"  
(voting group)
- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

March 10, 2017  
Dated \_\_\_\_\_

Signature Ross Smith

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Ross Smith  
(Typed or printed name of person signing)

Chief Revenue Officer  
(Title of person signing)