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ATTY DKT: 1030-53

FORM PTO-1594 (Rev.6-93) OMB No. 0651-0011 (exp. 4/94)	U.S. DEPARTMENT OF COMMERCE RECORDATION FORM COVER SHEET Patent and Trademark Office TRADEMARKS ONLY			
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.				
Name of conveying pa LIFESTREAM NATUR	arty(ies) RAL FOODS (1995) INC.	Name and address of receiving party(ies)     Name: NATURE'S PATH FOODS INC.		
© Corporation-State (CA □ Other	☐ Association☐ Limited PartnershipANADA) ☐ Limited Partnership☐ Party(ies) attached? ☐ Yes ☒ No	Internal Address: Street Address: <u>7453 Progress Way</u> City: Delta, British Columbia, Canada V4G 1E8		
the comma bef Reel 002778 /	☐ Merger ☐ Change of Name ☐ Elling of Receiving Party (Omitting fore INC.)	p Individual(s) citizenship: □ Association □ General Partnership □ Limited Partnership □ Corporation-State Canada □ Other If assignee is not domiciled in the United States, a domestic representative designation is attached. □ Yes No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? □ Yes No		
4. Application number(s) or patent number(s):  A. Trademark Application No.(s)  B. Trademark Registration No.(s)  2,149,787  Additional numbers attached? □ Yes ☑ No				
Name and address of concerning document	party to whom correspondence should be mailed.	6. Total number of applications and registrations involved: 1		
Name: Thomas M. Galgan Internal Address:	no, GALGANO & BURKE	7. Total fee (37 CFR 3.41)\$40.00  ☑ Enclosed □ Authorized to be charged to deposit account		
Street Address: <u>300 Rabro</u> Hauppauge	Drive, Suite 135	8. Deposit account number:		
City State		(Attach duplicate copy of this page if paying by deposit account)		
DO NOT USE THIS SPACE				
9. Statement and signature. To the best of my knowledge and belief, the feregoing information is true and correct and any attached copy is a true copy of the original document.  Thomas M. Galgano				
Thomas M. Galgano  Name of Person Signing  T	Signature ( Total number of pages including cover shee	Date		

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

TRADEMARK REEL: 002819 FRAME: 0521

<u>/ / 17-20</u>	ATT DATE TOSU-4			
FORM PTO-1594	U.S. DEPARTMENT OF COMMERCE			
FORM PTO-1594 (Rev.6-93)	HEET Patent and Trademark Office			
OMB No. 0651-0011 (exp. 4/94)				
OMB No. 0651-0011 (exp. 4/94) 1024994	30			
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.				
1. Name of conveying party(ies) 6-76-93 LIFESTREAM NATURAL FOODS (1995) INC.	Name and address of receiving party(ies)     Name: NATURE'S PATH FOODS, INC.     Internal Address:			
□ Individual(s) □ Association □ General Partnership □ Limited Partnership ② Corporation-State (CANADA) □ Other	Street Address: 7453 Progress Way  City: Delta, British Columbia, Canada V4G 1E8			
	<u>u</u> Individual(s) citizenship:			
3. Nature of conveyance:	Association			
□ Assignment □ Merger	General Partnership			
-	□ Limited Partnership  © Corporation-State: Canada			
□ Security Agreement □ Change of Name	□ Other			
© Other TO CORRECT REGISTRATION NO. 2,179,787 Reel: 001805 Frame: 0620 Execution Date:MARCH 2, 1998	If assignee is not domiciled in the United States, a domestic representative designation is attached. □ Yes ☑ No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? □ Yes ☑ No			
Application number(s) or patent number(s):     Trademark Application No.(s)	B. Trademark Registration No.(s)			
	2,149,787			
Additional numbers attached? □ Yes ▣ No				
Name and address of party to whom correspondence concerning document should be mailed.	6. Total number of applications and registrations involved: 1			
Name: Thomas M. Galgano, GALGANO & BURKE	7. Total fee (37 cFR 3.41)\$40.00			
Internal Address:	<u> </u>			
	Credit card payment form  [x] Authorized to be charged to deposit account			
Street Address: 300 Rabro Drive, Suite 135	8. Deposit account number:			
Hauppauge     New York     11788       City     State     Zip Code	(Attach duplicate copy of this page if paying by deposit account)			
DO NOT USE THIS SPACE				
9. Statement and signature.  To the best of my knowledge and belief, the-feregoing information is true and correct and any attached copy is a true copy of the original document.  Thomas M. Galgano  Name of Person Signing  Total number of pages including cover sheet, attachments, and documents:  1				
Mail documents to be recorded with required cover sheet information to:				

Washington, D.C. 20231

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REEL: 002819 FRAME 7: 0529 Rept Dt. #71

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P.07 FORM PTO-1594 ECORDATION FORM COVET HEET (Rov. €-93) TRADEMARKSONEÝ OMB No.: 0551-0011 (exp. 4/94) Ĵrab settirÎgş ⇔ ⇔ ⇔ 🔻 To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof. Name and address of receiving party(ies). Name of conveying party(ies); LIFESTREAM NATURAL FOODS Name: NATURE'S PATH FOODS INC. (1995) INC. Internal Address: Individual(s) Association Street Address: 7453 Progress Way □ General Partnership Limited Partnership ☑ Corporation-State (Canada) Delta, British Columbia, Canada V4G 1E8 □ Other □ Individual(s) citizenship\_\_\_ Additional name(s) of conveying party(ies) attached? Cl. Yes, 💥 No. □ Association \_\_\_\_\_ ☐ General Partnership\_\_\_\_\_\_ Nature of conveyance: ☐ Limited Partnership\_\_\_\_\_ Corporation-State\_\_Canada\_ □ Assignment 🗱 Merger □ Other Security Agreement Change of Name If assignee is not domiciled in the United States, a domestic representative designation □ Other is attached: ☐ Yes 🛠 No (Designations must be a separate document from assignment) Execution Date: March 2, 1998 Additional name(s) & address(es) attached? Cil Yes 💆 No. Application number(s) or patent number(s); A. Trademark Application No.(s) B. Trademark Registration No.(s) 74/717,643 1,519,024 1,821,562 75/378,635 1,608,385 1,863,839 1,801,651 2,179,787 Additional numbers attached? 🗇 Yes 💥 No. 5. Name and address of party to whom correspondence 6. Total number of applications and concerning document should be mailed; Name: THOMAS M. GALGANO, ESO. 7. Total fee (37 CFR 3.41).....\$320.00 GALGANO & BURKE Internal Address: Enclosed SUITE 135 Authorized to be charged to deposit account. Street Address: 300 RABRO DRIVE Deposit account number: .... City: HAUPPAUGE State: NY ZIP; 11788 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Thomas M. Galgano Name of Person Signing

Sign/ature

Oct. 19, 1998

Total number of pages including/cove/ sheet, attachments, and document:





NUMBER: 560465

## CERTIFICATE OF AMALGAMATION

COMPANY ACT

CERTIFIED A TRUE COPY OF A DOCUMENT ON FILE WITH THE REGISTRAR OF

COMPANIES

FOR REGISTRAR OF COMPANIES
FOR THE PROVINCE OF BRITISH COLUMBIA

I Hereby Certify that Nature's Path Foods Inc., incorporation number 270105, and Lifestream Natural Foods (1995) Inc., incorporation number 488997, were amalgamated effective March 1, 1998 as one company under the name NATURE'S PATH FOODS INC.

Issued under my hand at Victoria, British Columbia, on March 2, 1998

JOHN S. POWELL

Registrar of Companies

PROVINCE OF BRITISH COLUMBIA

CANADA

TRADEMARK
REEL: 002819 FRAME; 0524

**RECORDED: 03/25/2004**