

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	SECURITY INTEREST		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Bliss Beverage LLC		04/04/2007	LIMITED LIABILITY COMPANY: NEVADA
RECEIVING PARTY DATA			
Name:	Strategic Gaming Partners LLC		
Street Address:	420 Lincoln Road, Suite 430		
City:	Miami Beach		
State/Country:	FLORIDA		
Postal Code:	33139		
Entity Type:	LIMITED LIABILITY COMPANY: FLORIDA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3030316	SOCKO ENERGY	
CORRESPONDENCE DATA			
Fax Number:	(954)929-6563		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	305-450-4886		
Email:	kkossow@bellsouth.net		
Correspondent Name:	Kenneth D. Kossow, Esq.		
Address Line 1:	1325 Diplomat Parkway		
Address Line 4:	Hollywood, FLORIDA 33019		
NAME OF SUBMITTER:	Scott Hervey		
Signature:	/scott hervey/		
Date:	05/18/2007		

CH \$40.00 3030316

Total Attachments: 2

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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Kenneth D. Kossow, Esq. (305-450-4886)
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Kenneth D. Kossow, Esq. 1325 Diplomat Parkway Hollywood, Florida 33019

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Bliss Beverage, LLC					
OR	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 10050 N. Scottsdale Road, Suite 125		CITY Scottsdale	STATE AZ	POSTAL CODE 85253	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION LLC	1f. JURISDICTION OF ORGANIZATION Nevada	1g. ORGANIZATIONAL ID #, if any NVR-1240444-08	<input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	<input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Strategic Gaming Partners LLC					
OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 420 Lincoln Road, Suite 430		CITY Miami Beach	STATE FL	POSTAL CODE 33139	COUNTRY USA

Secured Party has a security interest in all of Debtor's, right, title, and interest, in, to, and under all property, both real and personal, tangible and intangible, of any and every kind, including, without limitation, all computer and other equipment, chattel paper, inventory (including, but not limited to, raw materials and work in process), goods, machinery, furniture, fixtures, and all accounts receivable, instruments, documents, general intangibles, and other rights of payment of every kind arising out of the business or investments of Debtor, whether presently owned, presently existing or hereafter created or acquired, wherever located, and together with all parts, accessories, attachments, accessions and accretions thereto, and all additions, products, replacements, insurance and other proceeds thereof, whether from the sale, lease, or other use or disposition of any of the foregoing. Secured Party's security interest in the foregoing collateral shall secure the performance of all of Debtor's obligations of any kind whatsoever to Secured Party.

5. ALTERNATIVE DESIGNATION (if applicable):	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (if applicable) (ADDITIONAL FEE)		optional			
8. OPTIONAL FILER REFERENCE DATA		<input checked="" type="checkbox"/> All Debtors		Debtor 1	Debtor 2	