TRADEMARK ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CERTIFICATE OF ASSUMED BUSINESS NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
VENOM GROUP INTERNATIONAL		107/21/2008	LIMITED LIABILITY COMPANY: IDAHO

RECEIVING PARTY DATA

Name:	VERTICAL PARTNERS WEST, LLC	
Street Address:	600 W. BUCKLES RD.	
City:	HAYDEN	
State/Country:	IDAHO	
Postal Code:	83835	
Entity Type:	LIMITED LIABILITY COMPANY: IDAHO	

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Serial Number:	85067579	ECO ALKALINES ECO-RESPONSIBLE BATTERIES

CORRESPONDENCE DATA

Fax Number: (440)684-1095

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 440-684-1090

Email: mkusner@kusnerjaffe.com, cgoellner@kusnerjaffe.com

Correspondent Name: Mark Kusner

Address Line 1: 6151 Wilson Mills Road

Address Line 2: Highland Place - Suite 310

Address Line 4: Highland Heights, OHIO 44143

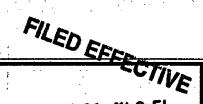
ATTORNEY DOCKET NUMBER:	SW10211US
NAME OF SUBMITTER:	Mark Kusner
Signature:	/mark kusner/
Date:	05/26/2011

Total Attachments: 1

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OF \$40.00 8506/5

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CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

08 JUL 21 AM 8: 54

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Venom Group In	nternational		
2. The true name(s) and business address(es) or business under the assumed business name: Name Vertical Partners West, LLC (W21936)			
Wholesale Trade Construction Services Agriculture Manufacturing Mining	str the assumed business name is: nd Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:		
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Vertical Partners West, LLC 600 W. Buckles Rd. Hayden, ID 83835	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301		
5. Name and address for this acknowledgment copy is (if other than # 4 above):			
ignature: (elonature required) rinted Name: Clinton R. Bower apacity/Title: Managing Member	IDAHO SECRETARY OF STATE ### ### ### ### ### ### ### ### ######		

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RECORDED: 05/26/2011