

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
H.D. ACQUISITION ENTERPRISES LLC		06/29/2012	LIMITED LIABILITY COMPANY: OHIO

RECEIVING PARTY DATA

Name:	Saltire Brands LLC
Street Address:	1062 Westchester Way
City:	Cincinnati
State/Country:	OHIO
Postal Code:	45244
Entity Type:	LIMITED LIABILITY COMPANY: OHIO

PROPERTY NUMBERS Total: 8

Property Type	Number	Word Mark
Registration Number:	1940058	HOUSE DOCTORS
Registration Number:	2040516	HOUSE MEDIC HANDYMAN SERVICE
Registration Number:	3175694	AMERICA'S TRUSTED NAME IN HOME REPAIR.
Registration Number:	3178761	REMODEL, IMPROVE, REPAIR WITH THE PROFESSIONALS
Registration Number:	3207734	A HANDYMAN. EVERY HOME NEEDS ONE.
Registration Number:	3207733	A GOOD HANDYMAN...TODAY, EVERYBODY NEEDS ONE.
Registration Number:	3207732	THE BIG NAME IN SMALL JOBS
Registration Number:	3509622	HOUSE DOCTORS HANDYMAN PROFESSIONALS HOME IMPROVEMENTS

CORRESPONDENCE DATA

Fax Number: 9374436635
Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.

Phone: 937-443-6817

OP \$215.00 1940058

Email: trademarks@thompsonhine.com
Correspondent Name: Roger H. Bora
Address Line 1: 10050 Innovation Drive, Suite 400
Address Line 4: Dayton, OHIO 45342-4934

ATTORNEY DOCKET NUMBER:	079986-003
NAME OF SUBMITTER:	Roger H. Bora
Signature:	/roger bora/
Date:	07/10/2012

Total Attachments: 3
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201218400928

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/03/2012	201218400928	LIMITED LIABILITY COMPANY - AMENDMENT (LAM)	50.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

THOMPSON HINE LLP
ATTN:CAROL R. RUSSELL
41 S. HIGH ST., #1700
COLUMBUS, OH 43215

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Jon Husted

2110200

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

SALTIRE BRANDS LLC

and, that said business records show the filing and recording of:

Document(s)
LIMITED LIABILITY COMPANY - AMENDMENT

Document No(s):
201218400928



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 29th day of June, A.D. 2012.

Jon Husted

Ohio Secretary of State

**TRADEMARK
REEL: 004818 FRAME: 0050**



Form 543A Prescribed by:
Ohio Secretary of State

JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mall this form to one of the following:

Regular Filing (non expedite)
P.O. Box 1329
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Domestic Limited Liability Company Certificate of Amendment or Restatement Filing Fee: \$50

(CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company

Amendment (129-LAM)

May 25, 2012
Date of Formation

(2) Domestic Limited Liability Company

Restatement (142-LRA)

Date of Formation

RECEIVED
SECRETARIAL OFFICE
MAY 29 10 27 AM '12

The undersigned authorized representative of:

H.D. Acquisition Enterprises LLC
Name of limited liability company
2110200
Registration Number

If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

The name of said limited liability company shall be:

Saltire Brands LLC

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd." or "ltd."

This limited liability company shall exist for a period of:

Period of Existence

Purpose

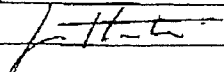
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Articles and original appointment of agent must be signed by a member, manager or other representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.


Signature

By (if applicable)

James Hunter
Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name