# 3291028

#### 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
On Target Media, LLC		I11/13/2007 I	LIMITED LIABILITY COMPANY: OHIO

#### **RECEIVING PARTY DATA**

Name:	Healthy Advice Networks, LLC
Street Address:	8230 Montgomery Road, Suite 300
City:	Cincinnati
State/Country:	оню
Postal Code:	45236
Entity Type:	LIMITED LIABILITY COMPANY: OHIO

#### PROPERTY NUMBERS Total: 3

Property Type	Number	Word Mark
Registration Number:	3291028	HEALTHY ADVICE
Registration Number:	3291029	TURN WAITING TIME INTO LEARNING TIME
Registration Number:	3302585	HEALTHY ADVICE

#### CORRESPONDENCE DATA

Fax Number: (513)651-6981

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

Phone: (513) 651-6800

Email: trademarks@fbtlaw.com

Correspondent Name: Monica L. Dias - Frost Brown Todd LLC
Address Line 1: 2200 PNC Center, 201 East Fifth Street

Address Line 4: Cincinnati, OHIO 45202

ATTORNEY DOCKET NUMBER:	65527/544663
NAME OF SUBMITTER:	Monica L. Dias

TRADEMARK
REEL: 004075 FRAME: 0653

900144930

Signature:	/mld/	
Date:	10/08/2009	
Total Attachments: 8 source=Assignment - Healthy Advice#page source=Assignment - Healthy Advice#page;	2.tif 3.tif 4.tif 5.tif 6.tif 7.tif	

TRADEMARK REEL: 004075 FRAME: 0654

DATE: 11/14/2007 DOCUMENT ID 200731800234

DESCRIPTION
MERGER/DOMESTIC (MER)

FILING 125.00 EXPED 100.00

PENALTY

CERT

COPY

Receipt

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

CORPORATION SERVICE COMPANY ATTN: LISA VAIDO 887 SOUTH HIGH STREET COLUMBUS, OH 43206

## STATE OF OHIO

### CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1328741

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

#### HEALTHY ADVICE NETWORKS, LLC

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

Document(s)

MERGER/DOMESTIC

Document No(s):

200731800234



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 13th day of November, A.D. 2007.

Ohio Secretary of State



#### Prescribed by:

The Ohio Secretary of State Central Ohio: (614) 466-3910

Toli Free: 1-877-SOS-FILE: (1-877-767-3453)

Expedite	this Form: passes one;
Breto	PO Box 1390 Columbus, OH 43216 less on additional fee of \$140 **
Ow	PO Box 1329 Columbus, OH 43216

www.sos.state.oh.us e-mail: busserv@sos.state.oh.us

#### **CERTIFICATE OF MERGER**

(For Damestic or Foreign, Profit or Nonprofit)

Filing Fee \$125.00

[154-MER]
In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings and losn, limited liability companies, limited partnerships and/or partnerships with limited liability, desiring to effect a merger, set forth the following facts:

JR۱	IVING ENTITY
. <b>T</b>	he name of the entity surviving the merger is:
0	On Target Media, LLC
3. N	tame Change: As a result of this merger, the name of the surviving entity has been changed to the following Tealthy Advice Networks, LLC
((	Complete only if name of surviving entity is changing through the merger)
). T	he surviving entity is a: (Please check the appropriate box and fill in the appropriate blanks
	Domestic (Ohio) For-Profit Corporation, charter number
	Domestic (Ohio) Nonprofit Corporation, charter number
	Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of and licensed to transact business in the State of Ohlo under license number
	Foreign (Non-Ohlo) Corporation incorporated under the laws of the state/country of and NOT licensed to transact business in the state of Ohlo,
	Domestic (Ohio) Limited Liability Company, with registration number 1328741
	Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and registered to do business in the State of Ohio under registration number
	Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and NOT registered to do business in the State of Ohio.
	Domestic (Ohio) Limited Partnership, with registration number
	Foreign (Non-Ohio) Limited Partnership organized under the laws of the state/country of

Last Revision: May 2002

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Domestic (Ohio) Partnership having limited in	•		
Foreign (Non-Ohio) Partnership having limite			
and registered to d	o business in the	state of Ohio under regi	stration number
Foreign (Non-Ohio) Partnership having limited li	sbility organizad un	ider the laws of the state/or lered to do business in the	ountry of state of Chic.
Foreign (Non-Ohio) Non-Profit incorporation und and licensed to transact business in the state of	ier the laws of the s Ohio under license	state/country of	
Foreign (Non-Ohio) Non-Profit incorporation unc	ter the laws of the tile of Ohio.	state/country of	
General partnership not registered with the	state of Ohio		
merging entities, please attach a separate sheet if	A SOURCE	ountry of Organization	Type of Entity
me / charter, license or registration number naRenna, LLC	Delawa	•	LLC
ERGER AGREEMENT ON FILE e name and mailing address of the person or en reement of merger upon written request; ealthy Advice Networks, LLC		hich eligible persons me	y obtain a copy of the
me)	(street)	NOTE: P.O. Bux Addresse.	s are NOT acceptable.
incinnati	ОН	45236-22	92
ty, village or township)	{state	s) (záp co	de)
FFECTIVE DATE OF MERGER his merger is to be effective on: ter the date of filing; the effective date of the me secified, the date of filing will be the effective date.	rger cannot be ea	specified, the date must effer than the date of filling	i be a date on or g, if no date is
		y exists, permits this man	rger. xmpilance with the laws each of the constituent
MERGER AUTHORIZEC		y exists, permits this ma	

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(лагне)	(street) NOTE: P.O. Box Addresses are NOT acceptable.
	, Ohio
(city, village o his item MUST be completed if the a thorized to conduct business in the	surviving entity is a foreign entity which is not licensed, registered or otherwise
II. ACCEPTANCE OF AGENT	
The undersigned, named herein acknowledges and accepts the a	as the statutory agent for the above referenced surviving entity, hereby ppointment of statutory agent for said entity.
	Signature of Agent
The acceptance of agent must be co hanged, or the named agent differs	mpleted by the surviving entities if through this merger the statutory agent hea in any way from the name currently on record with the Secretary of State.)
III. STATEMENT OF MERGER Upon fläng, or upon such later da listed surviving entity	ate as specified herein, the merging entity/entities listed herein shall merge into the
IX. AMENDMENTS The articles of incorporation, articles of incorporation, articles applications of the provided and are provided.	cles of organization, certificate of limited partnership or registration of partnership copriate term) of the surviving domestic critity have been amended.  X No Chances
<del>_</del>	
A. The fisted surviving foreign partnership, or partnership to bank, savings bank, savings imited liability, and hereby	RE OF FOREIGN SURVIVING ENTITY corporation, bank, savings and loan, limited liability company, limited awing limited liability desires to transact business in Ohlo se a foreign corporation, and loan, limited liability desires to transact business in Ohlo se a foreign corporation, and limited liability desires to transact partnership, or partnership having appoints the following as its statutory agent upon whom process, notice or demand award in the statu of Ohlo. The name and complete address of the statutory agent
A. The fisted surviving foreign in partnership, or partnership to bank, savings bank, savings limited liability, and hereby a against the entity may be se	corporation, bank, savings bank, savings and loan, limited liability company, limited naving limited liability desires to transact business in Ohio as a foreign corporation, s and loan, limited liability company, limited pertnership, or pertnership having annoints the following as its statutory seen upon whom process, notice or demand
A. The listed surviving foreign partnership, or partnership is bank, savings bank, savings limited liability, and hereby against the entity may be so is:	corporation, bank, savings bank, savings and loan, limited liability company, limited naving limited liability desires to transact business in Oho se a foreign corporation, s and loan, limited liability company, limited partnership, or partnership having appoints the following as its statutory agent upon whom process, notice or demand arved in the state of Oho. The name and complete address of the statutory agent
A. The listed surviving foreign partnership; or pertnership? bank, savings bank, savings limited liability, and hereby against the entity may be sais:	corporation, bank, savings bank, savings and loan, limited liability company, limited naving limited liability desires to transact business in Oho as a foreign corporation, s and loan, limited liability company, limited pertnership, or pertnership having appoints the following as its statutory agent upon whom process, notice or demand arwed in the state of Oho. The name and complete address of the statutory agent (sirest) NOTE: P.O. Box Addresses are NOT acceptable.

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nus:	t be completed.)		O IOSII, SIOII NIO ISSU	ving information
	The name of the Foreign Nationally/Fassociation is	ederally chartered bank, s	avings bank, or savin	gs and loan
b.)	The name(s) of any Trade Name(s) u	inder which the corporation	n will conduct busines	<b>15</b> :
(C.)	The location of the main office (non-	Ohio) shall be:		
	(sireet address)	NOTE: P.O. 5	ox Addresses are NOT a	ccaptable.
	(city, township, or village)	(county)	(state)	(z/p code)
(d.)	) The principal office location in the sta	ate of Ohio shall be:		
	(street address)	MOTE: P.O. 5	lox Addresses are NOT a	cceptable.
			Ohlo	(zip code)
	(oily, township, or village)	(county)	(state)	(ZIP C004)
(e.	(Please note, if there will not be a .) The corporation will exercise the foll (Please provide a brief summary of	lowing purpose(s) in the st	ste of Ohio:	
(e.	\ The comoration will exercise the foli	lowing purpose(s) in the st	ste of Ohio:	
Eo	\ The comoration will exercise the foli	lowing purpose(s) in the statch business to be conducted to be	ate of Ohio: ted; a general clause	is not sufficient)
Fo (If	.) The corporation will exercise the foll (Please provide a brief summary of Please provide a brief summary of the Corporation Custifying Limited Liability Corporation Corpo	(owing purpose(s) in the state business to be conducted to be	ate of Chio: ted; a general clause owing information mu	is not sufficient)
Fo (If	.) The corporation will exercise the foll (Please provide a brief summary of Please provide a brief summary of preign Qualifying Limited Liability C the qualifying entity is a foreign limited	towing purpose(s) in the state the business to be conducted to	ate of Chio: ted; a general clause general clause ming information mu cation/registration is	is not sufficient)
. Fo (If (a	The corporation will exercise the foliage (Please provide a brief summary of Please provide a brief summary of the Indiana Liability of the qualifying entity is a foreign limited to the name of the limited liability continue.) The name of the limited liability continues.	iowing purpose(s) in the state business to be conducted to be	ate of Ohio: ted; a general clause  owing information mu cation/registration is transact business in	is not sufficient)
. <b>Fo</b> (If (a	.) The corporation will exercise the foll (Please provide a brief summary of Please provide a brief summary of the qualifying Limited Liability Country of the qualifying entity is a foreign limited in.) The name of the limited liability control.) The name under which the limited is.) The name under which the limited is.) The limited liability company was on.	iowing purpose(s) in the state business to be conducted to be	ate of Ohio: ted; a general clause  owing information mu cation/registration is transact business in	is not sufficient)
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. <b>Fo</b> (If (a	.) The corporation will exercise the foll (Please provide a brief summary of Please provide a brief summary of the qualifying Limited Liability Country of the qualifying entity is a foreign limited in.) The name of the limited liability control.) The name under which the limited is.) The name under which the limited is.) The limited liability company was on.	iowing purpose(s) in the state business to be conducted to be	ate of Ohio: ted; a general clause  owing information mu cation/registration is transact business in	is not sufficient)

	(street address)	NOTE: P.O. B.	ox Addresses are NOT a	corplable.
	(city, township, or village)		(state)	(zip code)
	eign Qualifying Limited Partnersh ne qualifying entity is a foreign limite		nformation must be o	completed).
(a.)	The name of the limited partnership	o Is		
(b.)	The limited partnership was formed	on		
(c.)	The address of the office of the limit	ited partnership in its state/co	ountry of organization	n is:
	(street address)	HOTE: P.O. 8	ox Addresses are NOT a	esseptable.
	(city, township, or village)	(county)	(state)	(zip code)
(d.)	The limited pertnership's principal of	office address is:		
	(street address)	HOTE: P.O. B	ox Addresses are NOT a	seveptable.
	(city, lownship, or village)	(county)	(state)	(zip code)
(e.)	The names and business or reside follows:	nce addresses of the General	al partners of the par	tnership are as
	Name	Address		
	tient épace to cover this lignt, please attach a			
				esses of the
	The address of the office where a limited partners and their respective	re capital contributions is to b		
			lox Addresses are NOT	SCC uptable.

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Fc	oreign Qualifying Partnership Having Limited Liability						
(a	.) The name of the partnership shall be						
(b	.) Please complete the following appro	opriate section (either item b(!) or b(2)):					
	(1.) The address of the partnership	's principal office in Ohio is;					
	(street address)	NOTE: P.O. Bar Addresses are NOT acceptable.					
		, Ohio					
	(city, village or township)	(zip code)					
(11	the partnership does not have a pri	incipal office in Ohio, then Items b2 must be completed)					
	(a.) and case of the hearthstalkh	(2.) The address of the partnership's principal office (Non-Ohio):					
	(sirent address)	VOTE A C					
		NOTE: P.O. Box Addresss are NOT acceptable.					
	(city, township, or village)						
ír		(slate) (zip code)					
(c.							
(c.	.) The name and address of a statutor	(slate) (zip code)					
(c.		(slate) (zip code)					
(c.	.) The name and address of a statution (name)	(state) (alp code) y agent for service of process in Ohio is as follows:					
(c.	.) The name and address of a statutor	(slate) (zip code)					
(c.	.) The name and address of a statutor (name) (seet address)	(state) (alp code) y agent for service of process in Ohio is as follows:					
(c.	.) The name and address of a statution (name)	(state) (aip code) y agent for service of process in Ohio is as follows:  NOTE: P.O. Bax Addresses are NOT acceptable.					
	.) The name and address of a statution (name) (sieet address) (city, village or howners) .) Please Indicate the state or jurisdicti	(state) (aip code)  y agent for service of process in Ohio is as follows:  NOTE: P.O. Bax Addresses are NOT acceptable.  (Sip code)					
	(name) (sieet address) (city, village or hownship)	(state) (aip code) y agent for service of process in Ohio is as follows:  NOTE: P.O. Bax Addresses are NOT acceptable.  Ohio Ohio					
	.) The name and address of a statution (name) (sieet address) (city, village or howners) .) Please Indicate the state or jurisdicti	(state) (aip code)  y agent for service of process in Ohio is as follows:  NOTE: P.O. Bax Addresses are NOT acceptable.  (Sip code)					
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(d.	.) The name and address of a statution (name) (sieet address) (city, village or howners) .) Please Indicate the state or jurisdicti	(state) (alp code)  y agent for service of process in Ohio is as follows:  NOTE: P.O. Bax Addresses are NOT acceptable.  Ohio (stp code)  on in which the Foreign Limited Liability Partnership has been					
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man of entity)    Exact name of entity)	l'arget Media, LLC	YanaRenna, LLC	
Name of entity)    Name of entity)   Name of ent	name of entity)		<u> </u>
Name of entity)    Name of entity)   Name of ent	Manuel	Bur News	
Date:			
Some of analy)    Cased name of entity)   By:	•		
By:	11/13/07	Date: 11 13/01	
By:			
By:			
Its:  Date:  (Exact name of entity)  By:  Its:  Date:  Date:  Its:  Date:  Its:  Date:  Its:  Date:	name of entity)	(Exact name of entity)	
Date:    Caset name of entity)   (Exact name of entity)		By:	· · · · · · · · · · · · · · · · · · ·
Date:    Cascl name of entity)     Cascl name of entity)		lts:	·····
Name of entity)    Exact name of entity)			
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