

T97000000506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

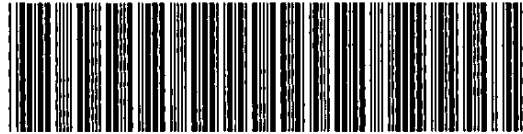
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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T97-506

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ASSIGNMENT

File 1st  
FILED  
12 MAY 09 AM 11:34  
TALLAHASSEE, FLORIDA

N. CAUSSEAU  
MAY 16 2012  
EXAMINER

## ASSIGNMENT OF MARK REGISTRATION

1. The mark to be assigned is: New Vision

2. Registration Number: T 97 000 000 506

3. (a) Assignor's name: KATHRYN McMillan

(b) Assignor's Business Address: 3280-C S. ATLANTIC Ave #87

Daytona Beach FL 32118  
City/State/Zip

If Different, Assignor's Mailing Address: \_\_\_\_\_

City/State/Zip

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12 MAY 09 AM 11:34  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

4. (a) Assignee's name: New Vision Videos LLC

(b) Assignee's Business Address: 3280-C S. ATLANTIC Ave #87

Daytona Beach Shores FL 32118  
City/State/Zip

If Different, Assignee's Mailing Address: \_\_\_\_\_

City/State/Zip

(c) Assignee's telephone number: ( 386 ) 788 1596

☐ Individual ☐ Corporation ☐ Joint Venture ☒ Limited Liability Company

☐ General Partnership ☐ Limited Partnership ☐ Union ☐ Other: \_\_\_\_\_

If other than an individual,

(1) Florida registration/ document number: L 11 000031713 (2) Domicile State: FLORIDA

(3) Federal Employer Identification Number: 45-1065547

5. All right, title and interest in and to said mark, together with the good will of the business in which the mark is used (or that part of the good will of the business connected with the use of and symbolized by the mark) is hereby

assigned by Kathryn McMillan to [Signature]  
(the Assignor) (the Assignee)

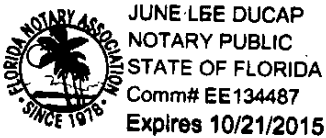
6. Assignor's Signature: [Signature]

By KATHRYN McMillan  
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this 8 day of May 2012 Kathryn McMillan  
(Name of Individual Signing)

☒ who is personally known to me ☐ whose identity I proved on the basis of \_\_\_\_\_

(Notary Seal)



[Signature]  
Signature of Notary Public

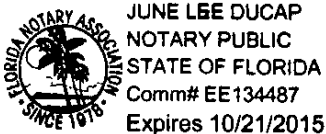
7. Assignee's Signature: [Signature]

By KATHRYN McMillan  
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this 8 day of May 2012 Kathryn McMillan  
(Name of Individual Signing)

☒ who is personally known to me ☐ whose identity I proved on the basis of \_\_\_\_\_

(Notary Seal)



[Signature]  
Signature of Notary Public

**FILING FEE: \$50 per class**  
**Division of Corporations P. O. Box 6327 Tallahassee, FL 32314**

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TALLAHASSEE, FLORIDA