

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM369474

|                                   |                                    |                       |                                    |
|-----------------------------------|------------------------------------|-----------------------|------------------------------------|
| <b>SUBMISSION TYPE:</b>           | NEW ASSIGNMENT                     |                       |                                    |
| <b>NATURE OF CONVEYANCE:</b>      | CHANGE OF NAME                     |                       |                                    |
| <b>CONVEYING PARTY DATA</b>       |                                    |                       |                                    |
| <b>Name</b>                       | <b>Formerly</b>                    | <b>Execution Date</b> | <b>Entity Type</b>                 |
| TAMPA BAY RECREATION, LLC         |                                    | 10/15/2015            | LIMITED LIABILITY COMPANY: FLORIDA |
| <b>RECEIVING PARTY DATA</b>       |                                    |                       |                                    |
| <b>Name:</b>                      | ISM SADDLES, LLC                   |                       |                                    |
| <b>Street Address:</b>            | 1909 FOGGY RIDGE PARKWAY           |                       |                                    |
| <b>City:</b>                      | LUTZ                               |                       |                                    |
| <b>State/Country:</b>             | FLORIDA                            |                       |                                    |
| <b>Postal Code:</b>               | 33559                              |                       |                                    |
| <b>Entity Type:</b>               | LIMITED LIABILITY COMPANY: FLORIDA |                       |                                    |
| <b>PROPERTY NUMBERS Total: 23</b> |                                    |                       |                                    |
| <b>Property Type</b>              | <b>Number</b>                      | <b>Word Mark</b>      |                                    |
| <b>Registration Number:</b>       | 3539992                            | ADAMO RACING SADDLE   |                                    |
| <b>Registration Number:</b>       | 3539993                            | ADAMO ROAD            |                                    |
| <b>Registration Number:</b>       | 3539994                            | ADAMO                 |                                    |
| <b>Registration Number:</b>       | 3865508                            | ADAMO PODIUM          |                                    |
| <b>Registration Number:</b>       | 4178849                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4178848                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4178850                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4178851                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4482527                            | ADAMO ATTACK          |                                    |
| <b>Registration Number:</b>       | 4482528                            | ADAMO PEAK            |                                    |
| <b>Registration Number:</b>       | 4614535                            | ADAMO TIME TRIAL      |                                    |
| <b>Registration Number:</b>       | 4439150                            | PODIUM                |                                    |
| <b>Registration Number:</b>       | 4428700                            | ISM CRUISE            |                                    |
| <b>Registration Number:</b>       | 4622318                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4739848                            | ISMSEAT.COM           |                                    |
| <b>Registration Number:</b>       | 4622319                            | ISMSEAT.COM           |                                    |
| <b>Registration Number:</b>       | 4732937                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4732938                            | ISM                   |                                    |
| <b>Registration Number:</b>       | 4866801                            | PN                    |                                    |
| <b>TRADEMARK</b>                  |                                    |                       |                                    |

CH \$590.00 3539992

| Property Type  | Number   | Word Mark                                |
|----------------|----------|--|
| Serial Number: | 86618752 | PL                                       |
| Serial Number: | 86618761 | PS                                       |
| Serial Number: | 86792293 | THE RECOGNIZED LEADER IN MODERN SADDLE D |
| Serial Number: | 86733166 | THINK ABOUT IT                           |

**CORRESPONDENCE DATA**

**Fax Number:** 5616596313

*Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.*

**Phone:** 561-653-5000

**Email:** ip@akerman.com, angela.martin@akerman.com

**Correspondent Name:** AKERMAN LLP

**Address Line 1:** P.O. BOX 3188

**Address Line 4:** WEST PALM BEACH, FLORIDA 33402-3188

|                                |                      |
|--------------------------------|----------------------|
| <b>ATTORNEY DOCKET NUMBER:</b> | 4085-0 0219244       |
| <b>NAME OF SUBMITTER:</b>      | Peter A. Chiabotti   |
| <b>SIGNATURE:</b>              | /Peter A. Chiabotti/ |
| <b>DATE SIGNED:</b>            | 01/15/2016           |

**Total Attachments: 5**  
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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

MAIL

(Business Entity Name)

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OCT 27 2015  
J SHIVERS

TRADEMARK  
REEL: 005710 FRAME: 0803

1/1/16

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Tampa Bay Recreation, LLC**

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven G. Toll

Name of Person

Tampa Bay Recreation, LLC

Firm/Company

1909 Foggy Ridge Parkway

Address

Lutz, FL 33559

City/State and Zip Code

Steve@ismseat.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Toll at

Name of Person

( 813 ) 909-1441

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee  \$30.00 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**TRADEMARK  
REEL: 005710 FRAME: 0804**

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAMPA BAY RECREATION, LLC

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 06, 2004 and assigned Florida document number L04000072293.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ISM Saddles, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Andrea Toll, Esq.

New Registered Office Address:

1909 Foggy Ridge Parkway, Lutz, FL 33558

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New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

*Andrea Toll*

If Changing Registered Agent, Signature of New Registered Agent

**C. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:**

**MGR = Manager**

**AMBR = Authorized Member**

| <u>Title</u>                    | <u>Name</u> | <u>Address</u> | <u>Type of Action</u>        |
|---------------------------------|-------------|----------------|------------------------------|
| _____                           | _____       | _____          | <input type="checkbox"/> Add |
| <input type="checkbox"/> Remove |             |                |                              |
| <input type="checkbox"/> Change |             |                |                              |
| _____                           | _____       | _____          | <input type="checkbox"/> Add |
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| <input type="checkbox"/> Change |             |                |                              |
| _____                           | _____       | _____          | <input type="checkbox"/> Add |
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| <input type="checkbox"/> Change |             |                |                              |
| _____                           | _____       | _____          | <input type="checkbox"/> Add |
| <input type="checkbox"/> Remove |             |                |                              |
| <input type="checkbox"/> Change |             |                |                              |

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

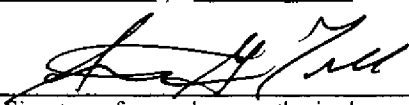
E. Effective date, if other than the date of filing: January 01, 2016 at 12:01 AM (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 16 OCTOBER, 2015



Signature of a member or authorized representative of a member

STEVEN G. TALL

Typed or printed name of signee

Page 3 of 3 Filing Fee: \$25.00

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