The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UN			E COMMISSION	OMB APPROV	VAL
		on, D.C. 20549 DRM D		OMB Number:	3235-0076
				Estimated average burden hours per response:	4.00
	Notice of Exempt	Offering of Secur	ities		
1. Issuer's Identity					
CIK (Filer ID Number)	Previous Names	None	Entity Type		
0001074828	Visualant, INC		X Corporation		
Name of Issuer	STARBERRYS (Limited Partnership)	
VISUALANT INC	CIGAR KING C	ORP	Limited Liability Co	mpany	
Jurisdiction of Incorporation/Organ	ization		General Partnershi		
NEVADA			H	P	
Year of Incorporation/Organization			Business Trust		
X Over Five Years Ago			Other (Specify)		
Within Last Five Years (Specify	Year)				
Yet to Be Formed					
2. Principal Place of Business an	d Contact Information				
Name of Issuer					
VISUALANT INC					
Street Address 1		Street Address 2			
500 UNION STREET		SUITE 420			
City	State/Province/Country	ZIP/PostalCode	Phone Number of Iss	suer	
SEATTLE	WASHINGTON	98101	206-903-1351		
3. Related Persons					
Last Name	First Name		Middle Name		
Erickson	Ronald		Р.		
Street Address 1	Street Address 2				
500 UNION STREET	SUITE 420				
City	State/Province/Count	ry	ZIP/PostalCode		
SEATTLE			98101		
Relationship: X Executive Officer					
Clarification of Response (if Necess	sary):				
Last Name	First Name		Middle Name		
Scott	Mark		E.		
Street Address 1	Street Address 2				
500 UNION STREET	SUITE 420				
City	State/Province/Count	ry	ZIP/PostalCode		
SEATTLE			98101		
Relationship: X Executive Officer					
Clarification of Response (if Necess	sary):				
Last Name	First Name		Middle Name		
Pepper	Jon				
Street Address 1	Street Address 2				
500 UNION STREET	SUITE 420 State/Province/Count		7IP/PootolCodo		
City SEATTLE	State/Province/Count WASHINGTON	ıy	ZIP/PostalCode 98101		
Relationship: Executive Officer	X Director Promoter				

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Takesako	Ichiro	
Street Address 1	Street Address 2	
500 UNION STREET	SUITE 420	
City	State/Province/Country	ZIP/PostalCode
SEATTLE	WASHINGTON	98101
Relationship: Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):		

5. Issuer Size

4. Industry Group

Revenue Range	OR /	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable	[Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company	Act Section 3(c)	
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)	
Rule 504 (b)(1)(i)	Section 3(c)(2)	Section 3(c)(10)	
Rule 504 (b)(1)(ii)	Section 3(c)(3)		
Rule 504 (b)(1)(iii)		Section 3(c)(11)	
Rule 505	_		
X Rule 506(b)	Section 3(c)(4)	Section 3(c)(12)	
Rule 506(c)	Section 3(c)(5)	Section 3(c)(13)	
Securities Act Section 4(a)(5)	Section 3(c)(6)		
	Section 3(c)(7)		
7. Type of Filing			
X New Notice Date of First Sale 2015-08-10 First Sale	Yet to Occur		
8. Duration of Offering			
Does the Issuer intend this offering to last more than one ye	ear? Yes X No		
9. Type(s) of Securities Offered (select all that apply)			
X Equity	Po	bled Investment Fund Interests	
Debt	Ter	ant-in-Common Securities	
Option, Warrant or Other Right to Acquire Another Secur	rity 🗌 Mir	eral Property Securities	
Security to be Acquired Upon Exercise of Option, Warrar Acquire Security	nt or Other Right to Oth	er (describe)	
10. Business Combination Transaction			
Is this offering being made in connection with a business co or exchange offer?	ombination transaction, suc	n as a merger, acquisition	
Clarification of Response (if Necessary):			
11. Minimum Investment			
Minimum investment accepted from any outside investor \$	0 USD		
12. Sales Compensation			
Recipient	Recipient CR	D Number X None	
VIS VIRES GROUP, INC.	None		
(Associated) Broker or Dealer X None	(Associated)	Broker or Dealer CRD Number $\overline{\mathrm{X}}$ None	
None	None	_	
Street Address 1	Street Address 2		
111 GREAT NECK ROAD City	SUITE 216 State/Province/Country ZIP/Postal Code		
GREAT NECK	NEW YORK 11021		
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	tates" or check individual States Foreign/non-US		
NEW YORK			
13. Offering and Sales Amounts			
Total Offering Amount \$84,000 USD or Indefinite			
Total Amount Sold \$84,000 USD			
Total Amount Sold \$84,000 USD Total Remaining to be Sold \$0 USD or			

Shares of Common Stock to be issued pursuant to a Securities Purchase Agreement dated August 10, 2015.

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$0 USD		Estimate
Finders' Fees \$0 USD	Π	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD		Estimate
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Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the
 accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
VISUALANT INC	/s/ Ronald P. Erickson	Ronald P. Erickson	CEO	2015-08-21

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's prevavation of their anti-fraud authority.