

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FilinglnOregon.com - Phone: (503) 986-2200

FILED

OCT 11 2011

REGISTRY NUMBER: 54/942

OREGON SECRETARY OF STATE

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.

We must release this information to all parties upon request.

For office use only

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Plea	se Type or Print Legibly in Black ink. Attach additional Sheets if Necessa			
1)	CORRESPONDENT NAME:	MAILING ADDRESS:	0	
	Green Leaf Lab, LLC	3430 S.E. Belmont, Ste. 101, Portland,	Oregon 9/214	
2)	APPLICANT'S NAME: (Owner: Individual or Entity)	Address:		
	Green Leaf Lab, LLC	3430 S.E. Belmont, Ste. 101, Portland,	Oregon 97214	
3)	IF THE APPLICANT IS AN ENTITY, ENTER THE STATE OF FORMATION:			
	Oregon			
4)	IF ENTITY IS A PARTNERSHIP, LIST NAMES OF GENERAL PARTNERS:			
5)	DESCRIPTION OF TRADE OR SERVICE MARK: (Include all words, designs an	d borders that comprise the mark) (Attach additional page if neede	d.)	
	The word "Cannalysis"			
6)) SPECIMEN OF MARK IS REQUIRED: X Attach a drawing or photocopy of the mark as it is actually used to this application.			
7)	GOODS OR SERVICES WITH WHICH THE MARK IS USED: (Examples of goods are pizzas, shirts; examples of services are serving food and selling clothing.)			
	Scientific testing of medical marijuana			
8) EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED: (Example: on goods, tags, labels, containers, etc.)				
	Advertising and other promotions			
9)	CLASS NUMBER(s) OF GOODS OR SERVICES: (See form 290-a)			
	142	.,		
10)	DATE MARK WAS FIRST USED ANYWHERE BY APPLICANT OR APPLIC	CANT'S PREDECESSOR IN INTEREST:		
	June 1, 2011		"	
11) DATE MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:				
	June 1, 2011			
12)	Execution:			
I, the applicant, own the mark, the mark is in use, and no other person has registered the mark with the federal government or in Oregon or has the to use the mark or a mark that so resembles the mark as to be likely to cause confusion or mistake or deceive when applied to the goods or services the other person. I declare under penalties of perjury that this application is true, correct and complete.				
	(If applicant is an entity, a member of a firm, officer of the corporation, officer of the limited liability company, or officer of an association must sign.)			
	Signature: Title:	Date:	, ,	
	General	Manager	/	
		/	,	
,				
Cor	TACT NAME: (To resolve questions with this filling.)		***************************************	
Paul Loney		# # #	***************************************	
PHONE NUMBER: (Include area code.)				
503-234-2694		81 8 8 7 11 1 8 18 8 8 8 18 7 18 6 18		

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Rowshan Reordan Information & Sales 503.250.2912 info@greenleaflab.org www.greenleaflab.org Green Leaf Lab P.O. Box 90027 Portland, OR 97290