



Trade and Service Marks - Registration

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

FILED

OCT 16 2019

OREGON
SECRETARY OF STATE

REGISTRY NUMBER:

For office use only

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

Please Type or Print Legibly in **Black** ink. Attach additional Sheets if Necessary.

1) **CORRESPONDENT NAME:**

Rudolph Lopez III

MAILING ADDRESS:

6665 SW Hampton Street Ste 200 Portland Or 97223

2) **APPLICANT'S NAME:** (Owner: ☒ Individual or ☐ Entity)

Dr. Jeff Robinson

ADDRESS:

4000 Kruse Way Place Suite 3-245 Lake Oswego Or 97035

3) **IF THE APPLICANT IS AN ENTITY, ENTER THE STATE OF FORMATION:**

4) **IF ENTITY IS A PARTNERSHIP, LIST NAMES OF GENERAL PARTNERS:**

5) **DESCRIPTION OF TRADE OR SERVICE MARK:** (Include all words, designs and borders that comprise the mark) (Attach additional page if needed.)

Word Mark: PROHEALTH CHIROPRACTIC Accompanied Logo is a green figure of a person bowing their arms to the sky

6) **SPECIMEN OF MARK IS REQUIRED:** ☒ 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.)

Chiropractic Services and General Health

8) **EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED:** (Example: on goods, tags, labels, containers, etc.)

Source identifier of chiropractic service for the the registered business PROHEALTH CHIROPRACTIC and its Webpage.

9) **CLASS NUMBER(S) OF GOODS OR SERVICES:** (See form 290-a)

142

10) **DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED ANYWHERE BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:**

July 17, 2007

11) **DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:**

July 17, 2017

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 right 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 of 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:

Jeffery Robinson

Digitally signed by Jeffery Robinson
Date: 2019.10.04 08:58:44 -07'00'

Title:

Owner

Date:

10-04-2019

CONTACT NAME: (To resolve questions with this filing.)

Rudolph Lopez III

PHONE NUMBER: (Include area code.)

503-968-8111



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on Division."

(503) 305-7244  ProHealth@ProHealthOregon.com



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Contact Us

Dr. Jeff Robinson developed ProHealth Chiropractic to be one of the most dynamic and up-to-date healthcare centers in the greater Portland area. He has established himself as an elite provider of Chiropractic Care and sports therapy and is committed to promoting the optimal health and well being