



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

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OREGON SECRETARY OF STATE

REGISTRY NUMBER: 50754  
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: Michael Jonas MAILING ADDRESS: 107 SE WASHINGTON ST, STE 156 PORTLAND, OR 97214

2) APPLICANT'S NAME: (Owner:  Individual or  Entity) ADDRESS: Hammond Potter, LLC PO Box 6271 Beaverton, OR 97007

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 and borders that comprise the mark) (Attach additional page if needed.)  
PotMates

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.)  
Cannabis products; delivery

8) EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED: (Example: on goods, tags, labels, containers, etc.)  
On website; on business cards

9) CLASS NUMBER(S) OF GOODS OR SERVICES: (See form 290-a)  
134; 139

10) DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED ANYWHERE BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:  
02/16/2018

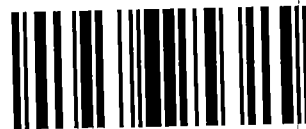
11) DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:  
02/16/2018

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: [Signature] Title: Attorney of Record Date: 11/11/2019

CONTACT NAME: (To resolve questions with this filing.)  
Michael Jonas  
PHONE NUMBER: (Include area code.)  
503-901-5014

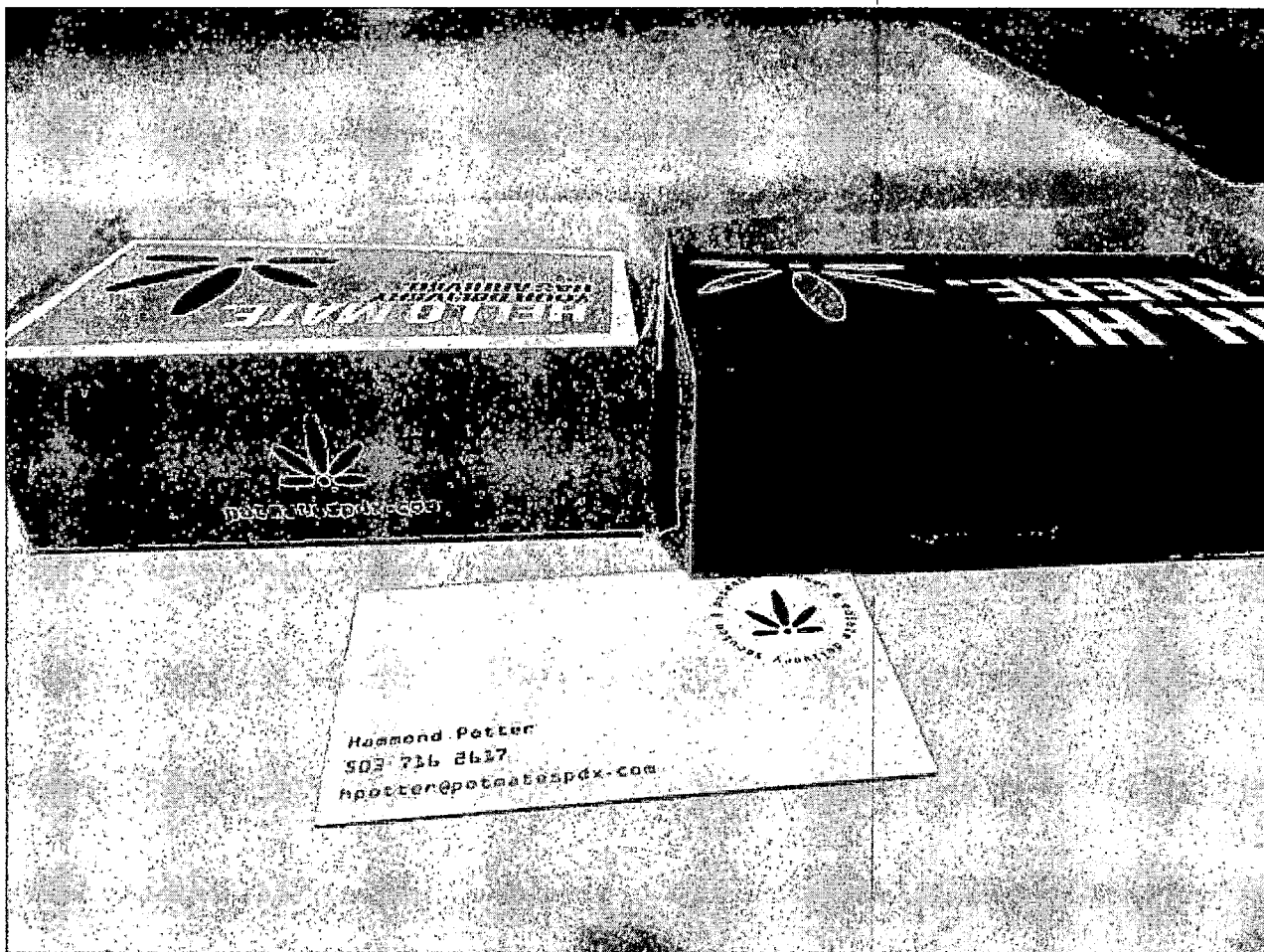


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Corporation Division.



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**We've made the process of buying cannabis better than you can possibly imagine, and we can't wait to show it to you. This is legalization the way it was always meant to be, the way it should have been from the very beginning. No headaches, no hassle, just high-quality cannabis on-demand. Whether you prefer flower, concentrates, or edibles, we've got your back.**

We're excited to tell you more and we'll show you everything when the time is right. Sign up below to be first in line to get all of the details and know when Pot Mates is live.

### Get Notified

email address

*We promise never to overuse your trust if you give us permission to stay in touch.*





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