



Secretary of S



50941

Trade and Service Marks - Registration

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FILED

APR 16 2020

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:

Jill Manger

MAILING ADDRESS:

5305 River Rd N Ste B, Keizer, OR 97303

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

Oregon Registered Agent LLC

ADDRESS:

5305 River Rd N Ste B, Keizer, OR 97303

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.)

Oregon Registered Agent

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.)

Business assistance, advisory and consulting services in the field of filing business formation documents; commercial registered agent services.

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

Website and online advertisements. Specifically https://www.oregonregisteredagent.com

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

135

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

November 17, 2014

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

November 17, 2014

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:

*J Manger*

Title:

Manager

Date:

04/06/2020

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

Bill Havre

PHONE NUMBER: (Include area code.)

(503)9141035

FEES

Required Processing Fee \$50.00


Processing Fees are nonrefundable. Please make check payable to "Corporation Division."

50941

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