



51194

Trade and Service Marks - Registration

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FILED

OCT 21 2020

REGISTRY NUMBER:

51194

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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.

OREGON
SECRETARY OF STATE

For office use only

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

1) CORRESPONDENT NAME:

Alex Trauman

MAILING ADDRESS:

117 SW Taylor St. Suite 300, Portland, OR 97204

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

Altar PDX LLC

ADDRESS:

3279 SE Hawthorne Blvd, Portland, OR 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:

N/A

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

The word "Altar"

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.)

Jewelry, womens' apparel, accessories, purses, bags, perfume, bath soaps, candles

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

Labels, goods, tags, advertising materials

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

103, 114, 118, 125

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

January 1, 2015

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

January 1, 2015

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:

Title:

Member

Date:

10 / 13 / 2020

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

Alex Trauman

PHONE NUMBER: (Include area code.)

503-417-0505

FEES

Required Processing Fee \$50.00

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

Altar Pdx - Williams

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ALTAR

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Each box is valued at \$80 (retail) and can be purchased in the following tiers:

- 1 month (one time purchase): \$68 per box
- 3 month subscription: \$27.50 per box
- 6 month subscription: \$12.50 per box

Box shown is just an example- every box will contain unique surprises!

HOT TIP: Even though, we have to charge for subscriptions up-front, you can use Altarpay at cart checkout to break your payments into interest free installments ☺

Title: One Month

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