



FILED  
OCT 15 2021

OREGON  
SECRETARY OF STATE

REGISTRY NUMBER:

51737

For office use only

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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.

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

- 1) **CORRESPONDENT NAME:** DANGER CLIFFS, LLC **MAILING ADDRESS:** 7060 SW MONTGOMERY WAY WILSONVILLE OR 97070
- 2) **APPLICANT'S NAME:** (Owner:  Individual or  Entity) **ADDRESS:** DANGER CLIFFS, LLC 7060 SW MONTGOMERY WAY WILSONVILLE OR 97070
- 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.) SEE ATTACHED PAGE
- 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.) GOODS - SHIRTS, HATS, OTHER CLOTHING ITEMS / STICKERS, PATCHES, SIGNS, OTHER LABELING ITEMS
- 8) **EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED:** (Example: on goods, tags, labels, containers, etc.) USED ON GOODS AS DECORATION PROVIDING TIE TO "DANGER CLIFFS" BRAND RECOGNITION
- 9) **CLASS NUMBER(S) OF GOODS OR SERVICES:** (See form 290-a) 125, 128
- 10) **DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED ANYWHERE BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:** October, 15, 2017
- 11) **DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:** October, 15, 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:

*[Handwritten Signature]*

Title:

*Managing Member*

Date:

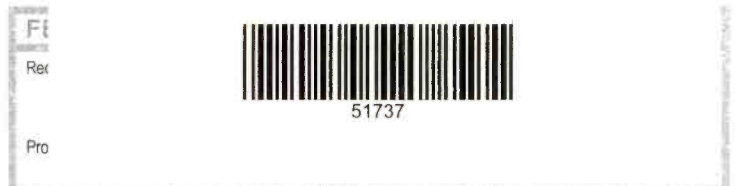
*8/9/21*

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

GREG GAHAN

**PHONE NUMBER:** (Include area code.)

503-341-6040



51737

**DANGER CLIFFS, LLC – DESCRIPTION OF TRADE OR SERVICE MARK:**

1. DANGER CLIFFS
2. “Black circle with outdoor activity icon/symbol in the middle with a red circle around the icon with a slash across the icon/symbol with the words DANGER CLIFFS” (SEE BELOW IMAGE)

