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OREGON SECRETARY OF STATE

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: MAILING ADDRESS: Michelle Lentzner Michelle E. Lentzner Law Office P.O. Box 1772, Lake Oswego, Oregon 97035 2) APPLICANT'S NAME: (Owner Individual or Entity) Unosquare, LLC. 4800 Meadows Road, Suite 300, Lake Oswego, Oregon 97035 3) IF THE APPLICANT IS AN ENTITY, ENTER THE STATE OF FORMATION: Nevada 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.) The term UNOSQUARE atop 21 squares arranged in a descending pixel design 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.) PLEASE SEE ATTACHED PAGE 8) EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED: (Example on goods, tags, labels, containers, etc.) On website and social media advertising Unosquare, LLC's services 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: 11) DATE (MONTH, DAY, YEAR) MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST: 12/16/11 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 Date Principal/Executive Chairman

CONTACT NAME: (To resolve questions with this filling )

Michelle Lentzner

PHONE NUMBER: (Include area code )

503-705-1090

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

## State of Oregon Trade and Service Marks-Registration

Additional Sheet for Registry Number 51776

Applicant:

Unosquare, LLC

4800 Meadows Road, Suite 300, Lake Oswego, OR 97035

5). UNOSQUARE combined design and word trademark:



7). Goods or services with which the mark is used:

Scientific and technological services, namely, research and design in the fields of industrial analysis and investigation services in the form of research, design, development and testing of computer software, mobile applications, data analytics and data visualization; design and development of computer hardware and software

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Active Clients

7+ **Timezones** Covered

**Full Time Engineering Staff** 

2000+ Delivered **Projects** 

> Distributed Teams

## **TESTIMONIALS**

"Not only did Unosquare give us solid guidance on the project, it innovated on its own."

NICK CUTILLO, DIRECTOR OF PRODUCT ENGINEERING **FOUNDATION MEDICINE** 

98% Client

Retention

6

Countries of Operation

8% Staff Attrition