## TRADEMARK ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE: **NEW ASSIGNMENT** NATURE OF CONVEYANCE: Statement of Correction to Change of Name

#### **CONVEYING PARTY DATA**

| Name              | Formerly | Execution Date | Entity Type           |
|-------------------|----------|----------------|-----------------------|
| Corr-Jensen, Inc. |          | 08/31/2012     | CORPORATION: COLORADO |

### **RECEIVING PARTY DATA**

| Name:           | Corr-Jensen Inc.          |
|-----------------|---------------------------|
| Street Address: | 221 South Cherokee Street |
| City:           | Denver                    |
| State/Country:  | COLORADO                  |
| Postal Code:    | 80223                     |
| Entity Type:    | CORPORATION: COLORADO     |

PROPERTY NUMBERS Total: 10

| Property Type        | Number   | Word Mark                   |
|----------------------|----------|-----------------------------|
| Serial Number:       | 85165292 | AB CUTS                     |
| Registration Number: | 3508036  | ABDOMINAL CUTS              |
| Registration Number: | 3632985  | EVERY ATHLETE. EVERY SPORT. |
| Registration Number: | 3632900  | GAME TIME                   |
| Serial Number:       | 77503585 | POST GAME                   |
| Registration Number: | 3632901  | PRE SEASON                  |
| Registration Number: | 3508037  | REVOLUTION CORR-JENSEN LABS |
| Registration Number: | 3778806  | [TD] TRAINING DAY           |
| Registration Number: | 3508038  | THERMOGENIC PUSH            |
| Registration Number: | 3632818  | TRAINING DAY                |

## **CORRESPONDENCE DATA**

3032230942 Fax Number:

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

via US Mail.

**TRADEMARK** REEL: 004895 FRAME: 0435

Phone: (303)223-1142 Email: eholmes@bhfs.com Correspondent Name: Emily C. Holmes 410 Seventeenth Street Address Line 1: Address Line 2: **Suite 2200** Address Line 4: Denver, COLORADO 80202 ATTORNEY DOCKET NUMBER: 012358.0006 NAME OF SUBMITTER: Emily C. Holmes Signature: /emilycholmes/ Date: 11/07/2012 Total Attachments: 3 source=CJ Stmt of Correction#page1.tif

source=CJ Stmt of Correction#page1.tif source=CJ Stmt of Correction#page2.tif source=CJ Stmt of Correction#page3.tif

> TRADEMARK REEL: 004895 FRAME: 0436

Document processing fee
If document is filed on paper
If document is filed electronically
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information or print copies of filed

\$150.00 Currently Not Available

> 20121482906 \$150.00 SECRETARY OF STATE 08/31/2012 11:46:13

documents, visit <u>www.sos.state.co.us</u> and select Business.

Paper documents must be typewritten or machine printed.

ABOVE SPACE FOR OFFICE USE ONLY

# Statement of Correction Correcting Information Other Than Principal Office Address or Registered Agent Information

filed pursuant to \$7-90-305 of the Colorado Revised Statutes (C.R.S.)

| Document number (of filed document to be corrected)                      | 20121472169                             |  |
|--|---|--|
| ID number  | 20071382686                             | <u> </u>                               |
| 1. Entity name   | Corr-Jensen, Inc.                       |  |
| 2. True name (if different from the entity name)                         |   |  |
| The corrected statement(s) below corrected in the filed document identif |   |  |
| Complete the following sections as appromplete section 15.               | licable. Leave the section              | n blank if it does not apply. You must |
| 3. Corrections made below are intended to OR                             | o update the entity's curre             | ent information 🔽                      |
| Corrections made below are intended for current information.             | or historical purposes onl              | y, and not to update the entity's      |
| 4. Correction of entity name of record                                   | Corr-Jensen Inc.                        |  |
| 5. Correction of true name of record                                     | *************************************** |  |
| 6. Correction of entity form of record                                   | ****                                    | 884                                    |
| 7. Correction of jurisdiction of formation of record                     |   |  |
|  | 1.                                      |  |

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|                                  | prrection of delayed effectivete of record   |
|----------------------------------|--|
|                                  | only for filed documents that have not (mm/dd/yyyy) become effective)  |
| 9.                               | prrection of period of duration of record  |
|                                  | the entity's period of duration as corrected is perpetual, mark this box   |
|                                  | OR   |
|                                  | period of duration is less than erpetual, state the date on which e period of duration expires:  (mnv/dd/yyyy)   |
|                                  | •  |
| 10                               | other information contained in the filed document is being corrected, mark this box and include an trachment stating the information to be corrected and each such correction.   |
| 11                               | Correction regarding unauthorized filed document (if the filed document should not have been filed, mark this not and include an attachment stating each incorrect statement that is corrected by the statement of correction), only for filed documents that have become effective)   |
| 12                               | this statement of correction affects another record in the records of the Secretary of State, mark this ox and include an attachment stating the entity name, true name, trade name, or trademark and the dentification number of that record.   |
| 13                               | this statement of correction affects this record's status, mark this box   |
| 14.                              | this statement of correction revokes a filed document that states a delayed effective date but has not yet become effective, adopt of following statement by marking the box.)  The filed document is revoked.   |
| ack<br>suc<br>of t<br>cor<br>doo | ing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or owledgment of each individual causing such delivery, under penalties of perjury, that such document is individual's act and deed, or that such individual in good faith believes such document is the act and deed person on whose behalf such individual is causing such document to be delivered for filing, taken in armity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent ments and the organic statutes, and that such individual in good faith believes the facts stated in such ment are true and such document complies with the requirements of that Part, the constituent documents, ne organic statutes. |
| Γh<br>Sta                        | perjury notice applies to each individual who causes this document to be delivered to the Secretary of whether or not such individual is identified in this document as one who has caused it to be delivered.   |
|                                  |  |
|                                  |  |
|                                  |  |

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| 15. | The true name and mailing add | ress of the individual causing this docum | ent to be delivered for filing are |
|-----|-------------------------------|---|------------------------------------|
|-----|-------------------------------|---|------------------------------------|

| Mares                   | 🛛 Sara      |          |                                       |          |
|-------------------------|-------------|----------|---------------------------------------|----------|
| (Last)                  | (Fir        | :51)     | (Middle)                              | (Suffix) |
| Brownstein Hyatt Fa     | arber Schre | ck LLF   | · · · · · · · · · · · · · · · · · · · | 13       |
|                         |             | Post Off | ice Box information)                  |          |
| 410 17th Street, ST     | E 2200      |          |                                       | 53       |
| Denver                  |             | C@g      | 80202                                 |          |
| (City)                  |             | (State)  | (ZIP/Postal                           | Code)    |
|                         | US          | A        | <b>13</b> .                           | •        |
| (Province - if applicab | ile)        | (Country | <i>i</i> )                            |          |

(If applicable, adopt the following statement by marking the box and include an attachment.)

This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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