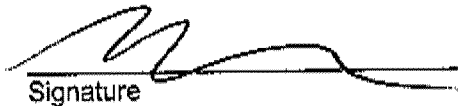


Client Code: JCAL.UCC1

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

To the Director, U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): (List using letters or numbers for multiple parties)</p> <p>JOHN CALEBAUGH</p> <p><input checked="" type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other: <input type="checkbox"/> Corporation of:</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: KNOBBE, MARTENS, OLSON & BEAR, LLP Internal Address: 14TH FLOOR Street Address: 2040 MAIN STREET City: IRVINE State: CA ZIP: 92614</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Other: CA Limited Liability Partnership</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Additional name(s) and address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Merger <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other: Security Interest</p> <p>Execution Date: (List as in section 1 if multiple signatures) 03/14/2019</p>	<p>4. Application number(s) or registration number(s):</p> <p>a. Trademark Application No(s):</p> <p>b. Trademark Registration No(s): 4993854</p> <p>Additional numbers attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>5. Party to whom correspondence concerning document should be mailed:</p> <p>Customer No. 20,995 Address: Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 Return Fax: (949) 760-9502 Attorney's Docket No.: JCAL.UCC1</p>	<p>6. Total number of applications and registrations involved: 2</p> <p>7. Total fee (37 CFR 1.21(h)): \$65.00 <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p>
<p>8. Deposit account number: 11-1410</p> <p>Please charge this account for any additional fees which may be required, or credit any overpayment to this account.</p>	
<p>9. Statement and signature.</p> <p>To the best of my knowledge and belief, the foregoing information is true and correct, and any attached copy is a true copy of the original document.</p> <p>ROSE THIESSEN  <u>3/5/2020</u> Name of Person Signing Signature Date</p> <p>Total number of pages including cover sheet, attachments and document: 4</p>	

recpay.opt
RECORDTM

CH \$65.00 4993854

<u>Case No.</u>	<u>Title:</u>	<u>Country:</u>	<u>Application No.</u>	<u>Filing Date:</u>	<u>Reg Date:</u>	<u>Reg No:</u>
JCAL.002T	DANNY TUBE	US	86/258306	4/21/2014	7/5/2016	4993854
JCAL.004T	LYP-SYNK PRODUCTS (stylized and/or with design)	US	86/391287	9/10/2014	10/6/2015	4825267

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

Filing # - 190003184622

Filed - 03/14/2019 09:45 AM

Page 1 of 2

Wisconsin Department of
Financial Institutions

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809

A. NAME & PHONE OF CONTACT AT FILER (optional) Michell Do / (949) 721-5265	20221
B. E-MAIL CONTACT AT FILER (optional) Michell.Do@Knobba.com	
C. SEND ACKNOWLEDGEMENT TO: (Name and Address)	
<input type="checkbox"/> Knobba, Martens, Olson & Bear, LLP Attn: Michell Do 2040 Main St., 14th Floor Irvine, CA 92614	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); If any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1AD)

1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Calebaugh	John		
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
500 N. Walton Dr.		Whitewater	WI	53190
				COUNTRY
				USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); If any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1AD)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Knobba, Martens, Olson & Bear, LLP			
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2040 Main St., 14th Floor		Irvine	CA	92614
				COUNTRY
				USA

4. COLLATERAL: This financing statement covers the following collateral:

SEE ATTACHMENT.

5. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 12 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6. Check only if applicable and check only one box:	
<input type="checkbox"/> Public-Finance Transaction	<input type="checkbox"/> Manufactured-Home Transaction
<input type="checkbox"/> A Debtor is a Transacting Utility	<input type="checkbox"/> Agricultural Lien
<input type="checkbox"/> Leasehold, owner	<input type="checkbox"/> Consignee/Consignor
<input type="checkbox"/> Boat/Railcar	<input type="checkbox"/> Banknote/Note
<input type="checkbox"/> License/Permit	<input type="checkbox"/> License/Permit
7. ALTERNATIVE DESIGNATION (if applicable):	
8. OPTIONAL FILER REFERENCE DATA: JCAL - UCCI	

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)

International Association of Commercial Administrators (IACA)

All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorneys' fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

US Patent & Patent Application

Patent No.	Date Issued	Title of Invention
D771941	11/22/2016	FISHING POLE PROTECTOR

US Trademark & Trademark Applications

Reg No.	Reg. Date	Trademark Name
4993834	07/05/2016	DANNY TUBE
4825267	10/06/2015	LYP-SYNEK PRODUCTS (stylized and/or with design)

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Page 2 of 2

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