

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM583055

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	LIEN		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Richard Cabados		06/25/2020	INDIVIDUAL: UNITED STATES
RECEIVING PARTY DATA			
Name:	Eric Hanscom		
Street Address:	7040 Avenida Encinas, Ste. 104-358		
City:	Carlsbad		
State/Country:	CALIFORNIA		
Postal Code:	92011		
Entity Type:	INDIVIDUAL: UNITED STATES		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3324629	LIFE IONIZER	
CORRESPONDENCE DATA			
Fax Number:			
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
Phone:	760 651 0142		
Email:	eric@iciplaw.com		
Correspondent Name:	Eric Hanscom		
Address Line 1:	7040 Avenida Encinas, Ste. 104-358		
Address Line 4:	Carlsbad, CALIFORNIA 92011		
NAME OF SUBMITTER:	Eric Hanscom		
SIGNATURE:	/Eric Hanscom/		
DATE SIGNED:	06/25/2020		
Total Attachments: 2			
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OP \$40.00 3324629



SECRETARY OF STATE
STATE OF CALIFORNIA

UCC Filing Acknowledgement

06/17/2020

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HANSCOM ERIC
5858 DRYDEN PLACE, SUITE 227
CARLSBAD CA 92011

Filing Fee: \$5.00
Total Fee: \$5.00

The California Secretary of State's Office has received and filed your document. The information below reflects the data that was indexed in our system. Please review the information for accuracy. Included is an image of the filed document to assist you in your review. If you find a potential error, please notify the UCC Section at the number listed below at your earliest convenience.

Filing Type: **Financing Statement**

File Date: **06/17/2020**

File Time: **16:05**

Filing Number: **20-7791992652**

Lapse Date: **06/17/2025**

Debtor(s):

INDIVIDUAL

CABADOS, RICHARD, ,

6352 CORTE DEL ABETO CARLSBAD CA USA 92011

Secured Party(ies):

INDIVIDUAL

HANSCOM, ERIC, ,

5858 DRYDEN PLACE, SUITE 227 CARLSBAD CA USA 92008

Filing by the Secretary of State is not conclusive proof that all conditions for securing priority have been met. Ensuring that accurate information is on the document to be filed is the responsibility of the filing party. If this filing is challenged, the Secretary of State does not guarantee that the filing is legally sufficient to secure priority under UCC Article 9 and expressly disclaims any liability for failure of the filing party to secure priority resulting from the information contained in the filed document, or the lack of information on the filed document.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Eric Hanscom 760 651 0142
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Eric Hanscom 5858 Dryden Place, Suite 227 Carlsbad, CA 92011 USA

DOCUMENT NUMBER: 90582800002
FILING NUMBER: 20-7791992652
FILING DATE: 06/17/2020 16:05

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR CA 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)

OR	1a. ORGANIZATION'S NAME			
	1b. INDIVIDUAL'S SURNAME Cabados	FIRST PERSONAL NAME Richard	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 6352 Corte Del Abeto	CITY Carlsbad	STATE CA	POSTAL CODE 92011	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)

OR	2a. ORGANIZATION'S NAME			
	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)

OR	3a. ORGANIZATION'S NAME			
	3b. INDIVIDUAL'S SURNAME Hanscom	FIRST PERSONAL NAME Eric	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 5858 Dryden Place, Suite 227	CITY Carlsbad	STATE CA	POSTAL CODE 92008	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
US Trademark No. 3324629 for "LIFE IONIZER", filed Aug. 17, 2006, registered Oct. 30, 2007

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

FILING OFFICE COPY

RECORDED: 06/25/2020

TRADEMARK
REEL: 006979 FRAME: 0480