

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM725736

<b>SUBMISSION TYPE:</b>	RESUBMISSION		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>RESUBMIT DOCUMENT ID:</b>	900679998		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Western Sling Company		01/28/2022	Corporation: COLORADO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Western Sling, LLC		
<b>Street Address:</b>	36 South 18th Ave		
<b>Internal Address:</b>	Ste D		
<b>City:</b>	Brighton		
<b>State/Country:</b>	COLORADO		
<b>Postal Code:</b>	80601		
<b>Entity Type:</b>	Limited Liability Company: COLORADO		
<b>PROPERTY NUMBERS Total: 2</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Serial Number:</b>	88441847	WESTERN SLING COMPANY	
<b>Serial Number:</b>	74342965	ALL-GRIP	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<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>			
<b>Email:</b>	Teas@friedfrank.com		
<b>Correspondent Name:</b>	Justin Charles c/o Fried Frank et al		
<b>Address Line 1:</b>	One New York Plaza		
<b>Address Line 4:</b>	New York, NEW YORK 10004		
<b>NAME OF SUBMITTER:</b>	Justin Charles		
<b>SIGNATURE:</b>	/Justin Charles/		
<b>DATE SIGNED:</b>	05/04/2022		
<b>Total Attachments: 15</b>			
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TRADEMARK

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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Combined Statement of Conversion

with Document # 20221112918 of  
Western Sling, LLC

Colorado Limited Liability Company

(Entity ID # 19871232161 )

consisting of 5 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/28/2022 that have been posted, and by documents delivered to this office electronically through 01/31/2022@ 18:08:06.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 01/31/2022 @ 18:08:06 in accordance with applicable law. This certificate is assigned Confirmation Number 13759801



A handwritten signature in cursive script that reads "Jena Griswold".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*  
*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."*



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 of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

Colorado Secretary of State  
 Date and Time: 01/28/2022 05:44 PM  
 ID Number: 19871232161  
 Document number: 20221112918  
 Amount Paid: \$100.00

ABOVE SPACE FOR OFFICE USE ONLY

**Statement of Conversion**

filed pursuant to § 7-90-201.7 (3) of the Colorado Revised Statutes (C.R.S.)

1. For the converting entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID number	<u>19871232161</u> <i>(Colorado Secretary of State ID number)</i>		
Entity name or true name	<u>WESTERN SLING COMPANY</u>		
Form of entity	<u>Corporation</u>		
Jurisdiction	<u>Colorado</u>		
Street address	<u>5453 N. Peterson Road</u> <i>(Street number and name)</i>		
	<u>Sedalia</u> <i>(City)</i>	<u>CO</u> <i>(State)</i>	<u>80135</u> <i>(ZIP/Postal Code)</i>
	<u></u> <i>(Province – if applicable)</i>	<u>United States</u> <i>(Country)</i>	
Mailing address (leave blank if same as street address)	<u>125 McCarty Street</u> <i>(Street number and name or Post Office Box information)</i>		
	<u>Houston</u> <i>(City)</i>	<u>TX</u> <i>(State)</i>	<u>77029</u> <i>(ZIP/Postal Code)</i>
	<u></u> <i>(Province – if applicable)</i>	<u>United States</u> <i>(Country)</i>	

2. The entity name of the resulting entity is WESTERN SLING COMPANY  
*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.

4. *(If applicable, adopt the following statement by marking the box and include an attachment.)*  
 This document contains additional information as provided by law.

5. *(Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)*

*(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)*  
 The delayed effective date and, if applicable, time of this document are \_\_\_\_\_  
*(mm/dd/yyyy hour:minute am/pm)*

Notice:

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This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

6. The true name and mailing address of the individual causing this document to be delivered for filing are

Geist	Michael		
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>
10704 Composite Drive			
<i>(Street number and name or Post Office Box information)</i>			
<hr/>			
Dallas	TX	75220	
<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>	
United States			
<i>(Province – if applicable)</i>		<i>(Country)</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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 ID Number: 19871232161  
 Document number: 20221112918  
 Amount Paid: \$100.00

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 of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

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**Articles of Organization**

filed pursuant to § 7-90-301 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

WESTERN SLING COMPANY

*(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)*

*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

2. The principal office address of the limited liability company's initial principal office is

Street address 5453 N. Peterson Road  
*(Street number and name)*

---

Sedalia CO 80135  
*(City) (State) (ZIP/Postal Code)*

---

United States  
*(Country)*

Mailing address 125 McCarty Street  
 (leave blank if same as street address) *(Street number and name or Post Office Box information)*

---

Houston TX 77029  
*(City) (State) (ZIP/Postal Code)*

---

United States  
*(Country)*

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name Geist Michael  
 (if an individual) *(Last) (First) (Middle) (Suffix)*

or

(if an entity) \_\_\_\_\_  
*(Caution: Do not provide both an individual and an entity name.)*

Street address 10704 Composite Dr.  
*(Street number and name)*

---

Dallas CO 75220  
*(City) (State) (ZIP Code)*

Mailing address \_\_\_\_\_  
 (leave blank if same as street address) *(Street number and name or Post Office Box information)*

\_\_\_\_\_  
(City) CO (State) \_\_\_\_\_  
(ZIP Code)

(The following statement is adopted by marking the box.)

The person appointed as registered agent has consented to being so appointed.

4. The true name and mailing address of the person forming the limited liability company are

Name  
(if an individual) \_\_\_\_\_  
(Last) (First) (Middle) (Suffix)

or

(if an entity) Bishop Lifting Products, Inc.  
(Caution: Do not provide both an individual and an entity name.)

Mailing address 10704 Composite Drive  
(Street number and name or Post Office Box information)

Dallas TX 75220  
(City) (State) (ZIP/Postal Code)  
United States  
(Province – if applicable) (Country)

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

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in

(Mark the applicable box.)

one or more managers.

or

the members.

6. (The following statement is adopted by marking the box.)

There is at least one member of the limited liability company.

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

This document contains additional information as provided by law.

8. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are \_\_\_\_\_  
(mm/dd/yyyy hour:minute am/pm)

Notice:

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This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

9. The true name and mailing address of the individual causing the document to be delivered for filing are

<u>Geist</u>	<u>Michael</u>		
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>10704 Composite Drive</u>			
<small>(Street number and name or Post Office Box information)</small>			
<hr/>			
<u>Dallas</u>	<u>TX</u>	<u>75220</u>	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
<u>United States</u>			
<small>(Province – if applicable)</small>		<small>(Country)</small>	

*(If the following statement applies, adopt the 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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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Correct Entity Name

with Document # 20221117738 of  
Western Sling, LLC

Colorado Limited Liability Company

(Entity ID # 19871232161 )

consisting of 2 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/28/2022 that have been posted, and by documents delivered to this office electronically through 01/31/2022@ 18:08:35.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 01/31/2022 @ 18:08:35 in accordance with applicable law. This certificate is assigned Confirmation Number 13759802



A handwritten signature in cursive script that reads "Jena Griswold".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*  
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Colorado Secretary of State  
 Date and Time: 01/31/2022 11:36 AM  
 ID Number: 19871232161  
 Document number: 20221117738  
 Amount Paid: \$10.00

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**Statement of Correction Correcting the Entity Name**  
 filed pursuant to §7-90-305 of the Colorado Revised Statutes (C.R.S.)

1. For the entity, its ID number and entity name are

ID number 19871232161  
*(Colorado Secretary of State ID number)*

Entity name  
 WESTERN SLING COMPANY

2. The document number of the filed document being corrected is 20221112918.

3. The entity name is incorrect.

4. Such entity name, as corrected, is  
 Western Sling Company, LLC

5.  This document contains additional information as provided by law.

**Notice:**

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

6. The true name and mailing address  
 of the individual causing the document  
 to be delivered for filing are

Geist Michael  
(Last) (First) (Middle) (Suffix)  
 10704 Composite Drive  
(Street name and number or Post Office Box information)  
 Dallas TX 75220  
(City) (State) (Postal/Zip Code)  
 United States  
(Province - if applicable) (Country - if not US)

*(If the following statement applies, adopt the 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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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Correct Entity Name

with Document # 20221119056 of  
Western Sling, LLC

Colorado Limited Liability Company

(Entity ID # 19871232161 )

consisting of 2 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/28/2022 that have been posted, and by documents delivered to this office electronically through 01/31/2022@ 18:09:07.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 01/31/2022 @ 18:09:07 in accordance with applicable law. This certificate is assigned Confirmation Number 13759804



A handwritten signature in cursive script that reads "Jena Griswold".

Secretary of State of the State of Colorado

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Colorado Secretary of State  
 Date and Time: 01/31/2022 02:15 PM  
 ID Number: 19871232161  
 Document number: 20221119056  
 Amount Paid: \$10.00

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**Statement of Correction Correcting the Entity Name**  
 filed pursuant to §7-90-305 of the Colorado Revised Statutes (C.R.S.)

1. For the entity, its ID number and entity name are

ID number 19871232161  
(Colorado Secretary of State ID number)

Entity name  
Western Sling Company, LLC

2. The document number of the filed document being corrected is 20221117738

3. The entity name is incorrect.

4. Such entity name, as corrected, is  
Western Sling, LLC

5.  This document contains additional information as provided by law.

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Geist Michael  
(Last) (First) (Middle) (Suffix)  
10704 Composite Drive  
(Street name and number or Post Office Box information)  
Dallas TX 75220  
(City) (State) (Postal/Zip Code)  
United States  
(Province - if applicable) (Country - if not US)

*(If the following statement applies, adopt the 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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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Statement of Change

with Document # 20221119154 of  
Western Sling, LLC

Colorado Limited Liability Company

(Entity ID # 19871232161 )

consisting of 2 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/28/2022 that have been posted, and by documents delivered to this office electronically through 01/31/2022@ 18:09:35.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 01/31/2022 @ 18:09:35 in accordance with applicable law. This certificate is assigned Confirmation Number 13759805



A handwritten signature in cursive script that reads "Jena Griswold".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*  
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Colorado Secretary of State  
 Date and Time: 01/31/2022 02:28 PM  
 ID Number: 19871232161

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Document number: 20221119154  
 Amount Paid: \$10.00

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**Statement of Change  
 Changing the Registered Agent Information**

filed pursuant to § 7-90-305.5 and § 7-90-702 of the Colorado Revised Statutes (C.R.S.)

1. The entity ID number and the entity name, or, if the entity does not have an entity name, the true name are

Entity ID number 19871232161  
*(Colorado Secretary of State ID number)*

Entity name or True name Western Sling, LLC

2. *(If applicable, adopt the following statement by marking the box and enter all changes.)*

The registered agent name has changed.

Such name, as changed, is

Name  
 (if an individual) \_\_\_\_\_  
*(Last) (First) (Middle) (Suffix)*

or

(if an entity) Capitol Corporate Services, Inc.  
*(Caution: Do not provide both an individual and an entity name.)*

*(The following statement is adopted by marking the box.)*

The person appointed as registered agent has consented to being so appointed.

3. *(If applicable, adopt the following statement by marking the box and enter all changes.)*

The registered agent address of the registered agent has changed.

Such address, as changed, is

Street address 36 South 18th Ave  
*(Street number and name)*

Ste D \_\_\_\_\_

Brighton CO 80601  
*(City) (State) (ZIP Code)*

Mailing address \_\_\_\_\_  
 (leave blank if same as street address) *(Street number and name or Post Office Box information)*

\_\_\_\_\_ CO \_\_\_\_\_  
*(City) (State) (ZIP Code)*



4. (If applicable, adopt the following statement by marking the box.)

The person appointed as registered agent has delivered notice of the change to the entity.

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

This document contains additional information as provided by law.

6. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are \_\_\_\_\_  
(mm/dd/yyyy hour:minute am/pm)

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7. The true name and mailing address of the individual causing this document to be delivered for filing are

<u>Geist</u>	<u>Michael</u>		
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>10704 Composite Drive</u>			
<small>(Street number and name or Post Office Box information)</small>			
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<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
<u>United States</u>			
<small>(Province if applicable)</small>		<small>(Country)</small>	

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