

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM744048

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------|---------------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT | | |
| NATURE OF CONVEYANCE: | SECURITY INTEREST | | |
| CONVEYING PARTY DATA | | | |
| Name | Formerly | Execution Date | Entity Type |
| BEAR BULL, INC. | | 06/29/2022 | Corporation: NEVADA |
| RECEIVING PARTY DATA | | | |
| Name: | KNOBBE, MARTENS, OLSON & BEAR, LLP | | |
| Street Address: | 2040 MAIN STREET | | |
| Internal Address: | 14TH FLOOR | | |
| City: | IRVINE | | |
| State/Country: | CALIFORNIA | | |
| Postal Code: | 92614 | | |
| Entity Type: | Limited Liability Partnership: CALIFORNIA | | |
| PROPERTY NUMBERS Total: 2 | | | |
| Property Type | Number | Word Mark | |
| Registration Number: | 6201130 | GIVBUX | |
| Registration Number: | 6491840 | GB | |
| CORRESPONDENCE DATA | | | |
| Fax Number: | 9497609502 | | |
| <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: | (949) 760-0404 | | |
| Email: | MICHELL.DO@KNOBBE.COM | | |
| Correspondent Name: | KNOBBE, MARTENS, OLSON & BEAR, LLP | | |
| Address Line 1: | 2040 MAIN STREET | | |
| Address Line 2: | 14TH FLOOR | | |
| Address Line 4: | IRVINE, CALIFORNIA 92614 | | |
| ATTORNEY DOCKET NUMBER: | ADMIN - BEAR.UCC1 | | |
| NAME OF SUBMITTER: | STEVEN J. NATAUPSKY | | |
| SIGNATURE: | /Steven J. Nataupsky/ | | |
| DATE SIGNED: | 07/27/2022 | | |
| Total Attachments: 1 | | | |
| source=2022-06-29 Recorded UCC1 Lien (NV) - BEAR#page1.tif | | | |

CH \$65.00 6201130

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|---------------------------------------------------------------------------------------------------|---------------------------------------------|
| Filed in the Office of <i>Barbara K. Cegavske</i> Secretary of State State Of Nevada | Initial Filing Number 202250396-8 |
| | Filed On June 29, 2022 06:37 PM |
| | Number of Pages 1 |

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|--------------------------------------------------------------------------------------------------------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) Michell Do 949-721-5265 |
| B. E-MAIL CONTACT AT FILER (optional) michell.do@knobbe.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) Knobbe Martens 2040 Main St., 14th Floor Irvine, CA 92614, USA |

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 BEAR BULL, INC. | | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 1c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 2901 WEST COAST HWY, SUITE 140 | NEWPORT BEACH | CA | 92663 | 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 KNOBBE, MARTENS, OLSON & BEAR, LLP | | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 3c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 2040 MAIN ST., 14TH FLOOR | IRVINE | CA | 92614 | USA |

4. COLLATERAL: This financing statement covers the following collateral:
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, AMOUNT 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.
TRADEMARK & TRADEMARK APPLICATIONS
 REG. NO. 6201130 REG. DATE: 11/17/2020 TRADEMARK NAME: GIVBUX
 REG. NO. 6491840 REG. DATE: 09/21/2021 TRADEMARK NAME: B WITHIN G LOGO (STYLIZED AND/OR DESIGN)

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:
BEAR - UCC1