

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM443227

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	NUNC PRO TUNC ASSIGNMENT		
EFFECTIVE DATE:	08/26/2017		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
DANIEL SHIR		08/26/2016	INDIVIDUAL:
RECEIVING PARTY DATA			
Name:	DSEC LLC		
Doing Business As:	Outdoorsman Lab		
Street Address:	800 Saint Charles Dr # 3		
City:	Thousand Oaks		
State/Country:	CALIFORNIA		
Postal Code:	91360		
Entity Type:	Limited Liability Company: CALIFORNIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Serial Number:	87145196	OUTDOORSMAN LAB	
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:	5038967094		
Email:	dan@outdoorsmanlab.com		
Correspondent Name:	Daniel Shir		
Address Line 1:	800 SAINT CHARLES DR APT 3		
Address Line 4:	THOUSAND OAKS, CALIFORNIA 91360		
NAME OF SUBMITTER:	daniel shir		
SIGNATURE:	/daniel shir/		
DATE SIGNED:	09/14/2017		
Total Attachments: 2			
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OP \$40.00 87145196

16-338922



Secretary of State
Statement of Information
(Limited Liability Company)

118

LLC-12

FILED
Secretary of State
State of California

OCT 19 2016

IMPORTANT — Read instructions before completing this form.

Filing Fee - \$20.00

Copy Fees – Face Page \$1.00 & .50 for each attachment page;
Certification Fee - \$5.00

This Space For Office Use Only

1. Limited Liability Company Name

DSEC LLC

2. 12-Digit Secretary of State File Number

201624510224

3. State or Place of Organization (only if formed outside of California)

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box

3161 S SEPULVEDA BLVD APT206

City (no abbreviations)

LOS ANGELES

State

CA

Zip Code

90034

b. Mailing Address of LLC, if different than item 4a

City (no abbreviations)

State

Zip Code

c. Street Address of California Office, if item 4a is not in California - Do not list a P.O. Box

City (no abbreviations)

State

CA

Zip Code

5. Manager(s) or Member(s)

If no *managers* have been appointed or elected, provide the name and address of each *member*. At least one name and address must be listed. If the manager/member is an individual, complete items 5a and 5c (leave item 5b blank). If the manager/member is an entity, complete items 5b and 5c (leave item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete item 5b

DANIEL

Middle Name

Last Name

SHIR

Suffix

b. Entity Name - Do not complete item 5a

c. Address

3161 S SEPULVEDA BLVD APT306

City (no abbreviations)

LOS ANGELES

State

CA

Zip Code

90034

6. Agent for Service of Process

Item 6a and 6b: If the agent is an individual, the agent must reside in California and item 6a and 6b must be completed with the agent's name and California address. Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and item 6c must be completed (leave item 6a-6b blank).

a. California Agent's First Name (if agent is not a corporation)

DANIEL

Middle Name

Last Name

SHIR

Suffix

b. Street Address (if agent is not a corporation) - Do not list a P.O. Box

3161 S SEPULVEDA BLVD APT206

City (no abbreviations)

LOS ANGELES

State

CA

Zip Code

90034

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete item 6a or 6b

7. Type of Business

a. Describe the type of business or services of the Limited Liability Company

OUTDOOR EQUIPMENT MANUFACTURER AND RETAILER

8. Chief Executive Officer, if elected or appointed

a. First Name

CHIO MUI

Middle Name

Last Name

CHAN

Suffix

b. Address

3161 S SEPULVEDA BLVD APT206

City (no abbreviations)

LOS ANGELES

State

CA

Zip Code

90034

9. The information contained herein, including any attachments, is true and correct.

10/10/2016

Date

DANIEL SHIR

Type or Print Name of Person Completing the Form

OWNER

Title

Signature

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

Name: []


Company: []

Address: []

City/State/Zip: []

201624510224

FILED
Secretary of State
State of California
AUG 25 2016

 Secretary of State Articles of Organization Limited Liability Company (LLC)	LLC-1
IMPORTANT — Read Instructions before completing this form. Filing Fee - \$70.00 Copy Fees — First plain copy free; Additional copies: First page \$1.00 & .50 for each attachment page; Certification Fee - \$5.00 Important! LLCs may have to pay an annual minimum \$800 tax to the California Franchise Tax Board. For more information, go to https://www.ftb.ca.gov .	

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1. **Limited Liability Company Name** (See Instructions — Must contain an LLC ending such as LLC or L.L.C. "LLC" will be added, if not included.)
 DSEC LLC

2. **Business Addresses**

a. Initial Street Address of Designated Office in California - Do not list a P.O. Box 3161 S SEPULVEDA BLVD APT206	City (no abbreviations) LOS ANGELES	State CA	Zip Code 90034
b. Initial Mailing Address of LLC, if different than Item 2a	City (no abbreviations)	State	Zip Code

Item 3a and 3b: If naming an individual, the agent must reside in California and Item 3a and 3b must be completed with the agent's name and complete California street address.
 Item 3c: If naming a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 3c must be completed (leave Item 3a-3b blank).

3. **Agent for Service of Process**

a. California Agent's First Name (if agent is not a corporation) DANIEL	Middle Name	Last Name SHIR	Suffix
b. Street Address (if agent is not a corporation) - Do not list a P.O. Box 3161 S SEPULVEDA BLVD APT206	City (no abbreviations) LOS ANGELES	State CA	Zip Code 90034
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 3a or 3b			

4. **Management (Select only one box)**


The LLC will be managed by:

One Manager More than One Manager All LLC Member(s)

5. **Purpose Statement (Do not alter Purpose Statement)**

The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

6. The information contained herein, including in any attachments, is true and correct.


 Organizer sign here DANIEL SHIR
 Print your name here