

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM698531

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	SECURITY INTEREST		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
SALEEN AUTOMOTIVE, INC.		11/25/2021	Corporation: FLORIDA
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:	4343582	POWER IN THE HANDS OF A FEW	
Registration Number:	4343583	POWER IN THE HANDS OF A FEW	
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 - SALEN.UCC1		
NAME OF SUBMITTER:	STEVEN J. NATAUPSKY		
SIGNATURE:	/Steven J. Nataupsky/		
DATE SIGNED:	12/29/2021		
Total Attachments: 3			
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source=2021-11-05 Recorded UCC1 Lien (FL) - SALEN#page2.tif			

CH \$65.00 4343582

**STATE OF FLORIDA UNIFORM COMMERCIAL CODE
FINANCING STATEMENT FORM**

A. NAME & DAYTIME PHONE NUMBER OF CONTACT PERSON MICHELL DO / (949) 721-5265	
B. Email Address	
C. SEND ACKNOWLEDGEMENT TO:	
Name	KNOBBE, MARTENS, OLSON & BEAR, LLP / ATTN: MICHELL DO
Address	2040 MAIN ST., 14TH FLOOR
Address	
City/State/Zip	IRVINE, CA 92614

FILED

2021 Nov 05 09:52 AM

***** 202109040724 *****

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME – INSERT ONLY ONE DEBTOR NAME (1a OR 1b) – Do Not Abbreviate or Combine Names

1.a ORGANIZATION'S NAME SALEEN AUTOMOTIVE, INC.				
1.b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1.c MAILING ADDRESS Line One 2735 WARDLOW ROAD		This space not available.		
MAILING ADDRESS Line Two	CITY CORONA	STATE CA	POSTAL CODE 92882	COUNTRY USA

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME – INSERT ONLY ONE DEBTOR NAME (2a OR 2b) – Do Not Abbreviate or Combine Names

2.a ORGANIZATION'S NAME				
2.b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2.c MAILING ADDRESS Line One		This space not available.		
MAILING ADDRESS Line Two	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) – INSERT ONLY ONE SECURED PARTY (3a OR 3b)

3.a ORGANIZATION'S NAME KNOBBE, MARTENS, OLSON & BEAR, LLP				
3.b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3.c MAILING ADDRESS Line One 2040 MAIN ST., 14TH FLOOR		This space not available.		
MAILING ADDRESS Line Two	CITY IRVINE	STATE CA	POSTAL CODE 92614	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

SEE ATTACHMENT.

5. ALTERNATE DESIGNATION (if applicable) LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR
 AG LIEN NON-UCC FILING SELLER/BUYER

6. Florida DOCUMENTARY STAMP TAX – YOU ARE REQUIRED TO CHECK EXACTLY ONE BOX

- All documentary stamps due and payable or to become due and payable pursuant to s. 201.22 F.S., have been paid.
 Florida Documentary Stamp Tax is not required.

7. OPTIONAL FILER REFERENCE DATA

SALEN - UCC1