

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM767737

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	MERGER		
<b>EFFECTIVE DATE:</b>	12/29/2021		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Recollect Threads Ltd.		12/29/2021	Limited Liability Company: COLORADO
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Ouray Sportswear, LLC		
<b>Street Address:</b>	121 W. Mansfield Ave		
<b>City:</b>	Englewood		
<b>State/Country:</b>	COLORADO		
<b>Postal Code:</b>	80110		
<b>Entity Type:</b>	Limited Liability Company: COLORADO		
<b>PROPERTY NUMBERS Total: 5</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	5962385	LOCALE	
<b>Registration Number:</b>	5915836	LOCALE OUTDOOR	
<b>Registration Number:</b>	4239995	LOCALE	
<b>Registration Number:</b>	4428309	RT	
<b>Registration Number:</b>	4424891		
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	3038630223		
<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>Phone:</b>	3038639700		
<b>Email:</b>	phirschman@sheridanross.com		
<b>Correspondent Name:</b>	Pamela N. Hirschman, Sheridan Ross P.C.		
<b>Address Line 1:</b>	1560 Broadway, Suite 1200		
<b>Address Line 4:</b>	Denver, COLORADO 80202		
<b>ATTORNEY DOCKET NUMBER:</b>	11189		
<b>NAME OF SUBMITTER:</b>	Pamela N. Hirschman		
<b>SIGNATURE:</b>	/Pamela N. Hirschman/		
<b>DATE SIGNED:</b>	11/14/2022		

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**Total Attachments: 4**

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**Statement of Merger**

**(Surviving Entity is a Domestic Entity)**

filed pursuant to § 7-90-203.7 of the Colorado Revised Statutes (C.R.S.)

- For each merging 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	20111501525 <i>(Colorado Secretary of State ID number)</i>		
Entity name or true name	Recollect Threads Ltd.		
Form of entity	Limited Liability Company		
Jurisdiction	Colorado		
<u>Street</u> address	1201 W. Mansfield <i>(Street number and name)</i>		
	Englewood <i>(City)</i>	CO <i>(State)</i>	80110 <i>(ZIP/Postal Code)</i>
		United States <i>(Country)</i>	
<u>Mailing</u> address <i>(leave blank if same as street address)</i>	10856 Reed Hartman Highway <i>(Street number and name or Post Office Box information)</i>		
	Blue Ash <i>(City)</i>	OH <i>(State)</i>	45242 <i>(ZIP/Postal Code)</i>
		United States <i>(Country)</i>	

ID Number	 <i>(Colorado Secretary of State ID number)</i>		
Entity name or true name	 		
Form of entity	 		
Jurisdiction	 		

Street address

\_\_\_\_\_  
*(Street number and name)*

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\_\_\_\_\_  
*(City)*                      *(State)*                      *(ZIP/Postal Code)*

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\_\_\_\_\_  
*(Province - if applicable)*                      *(Country)*

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
*(Street number and name or Post Office Box information)*

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\_\_\_\_\_  
*(City)*                      *(State)*                      *(ZIP/Postal Code)*

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\_\_\_\_\_  
*(Province - if applicable)*                      *(Country)*

ID Number

\_\_\_\_\_  
*(Colorado Secretary of State ID number)*

Entity name or true name

\_\_\_\_\_

Form of entity

\_\_\_\_\_

Jurisdiction

\_\_\_\_\_

Street address

\_\_\_\_\_  
*(Street number and name)*

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\_\_\_\_\_  
*(City)*                      *(State)*                      *(ZIP/Postal Code)*

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\_\_\_\_\_  
*(Province - if applicable)*                      *(Country)*

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
*(Street number and name or Post Office Box information)*

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\_\_\_\_\_  
*(City)*                      *(State)*                      *(ZIP/Postal Code)*

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\_\_\_\_\_  
*(Province - if applicable)*                      *(Country)*

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

There are more than three merging entities and the ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and the principal address of each additional merging entity is stated in an attachment.

2. For the surviving entity, its entity 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

20071215490  
*(Colorado Secretary of State ID number)*

Entity name or true name

Ouray Sportswear, LLC

Form of entity Limited Liability Company

Jurisdiction Colorado

Street address 1201 W. Mansfield Ave.  
(Street number and name)

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Englewood CO 80110  
(City) (State) (ZIP/Postal Code)

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United States  
(Province - if applicable) (Country)

Mailing address 10856 Reed Hartman Hwy, Suite 150  
(leave blank if same as street address) (Street number and name or Post Office Box information)

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Blue Ash OH 45242  
(City) (State) (ZIP/Postal Code)

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United States  
(Province - if applicable) (Country)

3. Each merging entity has been merged into the surviving entity.

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

The plan of merger provides for amendments to a constituent filed document of the surviving entity and an appropriate statement of change or other document effecting the amendments will be delivered to the Secretary of State for filing pursuant to Part 3 of Article 90 of Title 7, C.R.S.

5. (If the following statement applies, adopt the statement by marking the box and state the appropriate document number(s).)

One or more of the merging entities is a registrant of a trademark described in a filed document in the records of the secretary of state and the document number of each filed document is

Document number \_\_\_\_\_

Document number \_\_\_\_\_

Document number \_\_\_\_\_

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

There are more than three trademarks and the document number of each additional trademark is stated in an attachment.

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

This document contains additional information as provided by law.

7. (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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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.

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

Myers	Miller	F.	
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>
1201 W. Mansfield Ave.			
<i>(Street number and name or Post Office Box information)</i>			
<hr/>			
Englewood	CO	80110	
<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>	
<i>(Province - if applicable)</i>	United States		
	<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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