Form must be filed electronically.

Paper forms are not accepted. This copy is a sample and cannot be submitted for filing.

Statement of Change of Trademark Information Changing the Principal Address

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

1. The entity ID number, if applicable, the trademark ID number, the true name of the trademark registrant, and such trademark as stated in the statement of trademark registration are

Entity ID number (<i>if applicable</i>)	(Colorado Secretary of State ID number)	-	
Trademark ID number		_	
	(Colorado Secretary of State ID number)		
True name			
Trademark			
2. The document number of the filed doc	cument that is changed is		
 3. (If applicable, adopt the following statement by m The principal address of such personal such principal address, as changed, is 	son has changed.		
<u>Street</u> address		er and name)	
	(City)	(State)	(Zip/Postal Code)
	(Province – if applicable)	(Country)	

4. (If applicable, adopt the following statement by marking the box. Enter all changes OR mark the box to remove the mailing address.) The mailing address of such person has changed.

Such mailing address, as changed, is

<u>iiling</u> address	(Street number and name or Post Office Box information)		
	(City)	(State)	(Zip/Postal Code)

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

The mailing address in the records of the Secretary of State is no longer different than the street address and is no longer required.

- 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

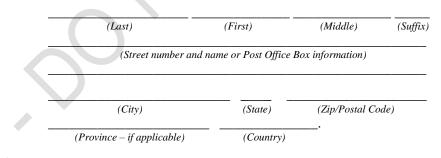
(mm/dd/yyyy hour:minute am/pm)

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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.

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



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

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