

10600000/203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

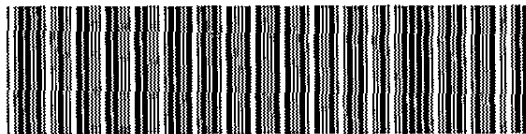
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✓✓

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September 19, 2006

KAREN ASHER-COHEN  
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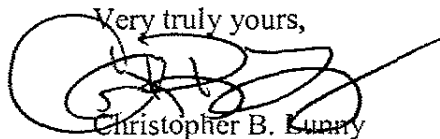
**HAND-DELIVERED**

Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: *The Fairway Insurance Group*  
Trademark Registration

Dear Sir/Madam:

We enclose the original and one copy of a trademark application together with three specimens and a check in the amount of \$175.00. Please register the trademark. Please return all correspondence concerning this matter to the below individual. If you have any questions, please feel free to contact us.

Very truly yours,  
  
Christopher B. Lunny

CBL:mr  
Enclosure

**APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK**  
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

TO: Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:

Christopher B. Lunny  
Radey Thomas Yon & Clark  
301 S. Bronough St., Suite 200  
Tallahassee, FL 32301

( 850 ) 425-6654 Fax: (850) 425-6694  
Daytime Telephone number

**PART I**

1. (a) Applicant's name: The Fairway Insurance Group, LLC

(b) Applicant's business address: 5353 N. Federal Highway, Suite 210  
Fort Lauderdale, Florida 33308  
City/State/Zip

If different, Applicant's mailing address: \_\_\_\_\_  
City/State/Zip

(c) Applicant's telephone number: ( 954 ) 772-9819  
☐ Individual ☐ Corporation ☐ Joint Venture ☒ Other: LLC  
☐ General Partnership ☐ Limited Partnership ☐ Union

If other than an individual,

(1) Florida registration/document number: L04000024625 (2) Domicile State: FL  
(3) Federal Employer Identification Number: 201108178

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:  
(i.e., furniture moving services, diaper services, house painting services, etc.)  
Insurance consulting and placement services (insurance agency)

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:  
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

(c) The mode or manner in which the mark is used: (i.e., labels, decals, newspaper advertisements, brochures, etc.)  
Brochures, direct mail solicitations, business cards and other company  
marketing pieces.

(Continued)

d) The class(es) in which goods or services fall:

Classes 36 and 42

**PART II**

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: 9/13/06 (b) Date first used in Florida: 9/13/06

**PART III**

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

A square, pale green box which includes the midsection of a white, Trajan font  
cursive "F", followed by The Fairway Insurance Group name.

English Translation \_\_\_\_\_

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "Insurance Group, LLC"  
"APART FROM THE MARK AS SHOWN."

I, Edward L. Brown III m62m, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

The Fairway Insurance Group, LLC.  
Typed or printed name of applicant

[Signature]

Applicant's signature  
(List name and title)

STATE OF Florida

COUNTY OF Broward

On this 15 day of September, 2006, Edward L. Brown III personally appeared before me,

☒ who is personally known to me ☐ whose identity I proved on the basis of \_\_\_\_\_

FILED  
06 SEP 20 PM 3:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



EDWARD L. BROWN III

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F: (954) 772-9564 • E-MAIL: ED@TFIGINS.COM  
WWW.TFIGINS.COM

BUSINESS,  
WORKERS COMP.  
HOME, AUTO,  
AND BONDS



[Signature]

Notary Public Signature

Chris Alex

Notary's Printed Name

Commission Expires:

\$87.50 per class

