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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

To 7-941

FILED
07 JUL 12 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____
(Mark to be registered)

The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Derrick Otto Williams

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(NOTE: The information contained in this cover letter will be included in the permanent record and will be available to the general public)

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

PART I

1. (a) Applicant's name: Derrick Otto Williams
(b) Applicant's business address: ~~1811 Oak Court~~ 3017 Wahnish Way
Tallahassee Florida ~~92310~~ 32305
City/State/Zip

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

(c) Applicant's telephone number: (850) ~~212-4118~~ 850-451-6037
 Individual Corporation Joint Venture Limited Liability Company
 General Partnership Limited Partnership Union Other: _____

If other than an individual,
(1) Florida registration/document number: _____ (2) Domicile State: _____
(3) Federal Employer Identification Number: _____

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.)

(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.)
Clothing; hats, t-shirts, socks, belt jeans.

(c) The specific way the mark is applied to the good(s) or used in advertising:(i.e., labels, decals, newspaper advertisements, brochures, etc.)
Inprinted on the goods.

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

Class 25

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: Jan. 11, 2005 (b) Date first used in Florida: Jan. 11, 2005

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.)

10 Till 9 Citi clownz and the stick figures, ~~including~~

~~the hat, shirt, see~~

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TALLAHASSEE FLORIDA
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English Translation _____

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " _____"
" APART FROM THE MARK AS SHOWN.

I, _____, 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 to the best of my knowledge no other person except a related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form there of or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause mistake or to deceive. 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

Derrick Williams

Typed or printed name of applicant

Derrick Williams

Applicant's signature
(List name and title)

STATE OF Florida

COUNTY OF Levy

On this 12 day of July, 2007, Derrick Williams personally appeared before me,

who is personally known to me whose identity I proved on the basis of Fl. Identification Card

 **Judy Sadler**
Commission # DD475990
Expires January 26, 2011
Bonded Troy Firm - Insurance, Inc. 800-385-731x

Judy Sadler
Notary Public Signature

Judy Sadler
Notary's Printed Name

My Commission Expires: 1-26-10

FILING FEE: \$87.50 per class



CITIZEN



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