

107000001567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

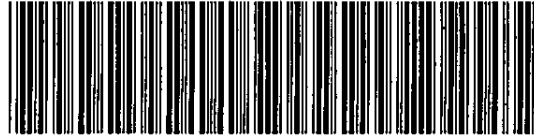
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



Headquarters

July 23, 2007

The Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Registration Number: T97000000495
Corporate Name and Address Change

Enclosed is payment and application for the Mark Renewal of the above referenced registration number for LifeSouth Community Blood Centers, Inc.

Please make the following correction to our corporate name and mailing address to be referenced on our certificate of renewal.

LifeSouth Community Blood Centers, Inc.
4039 Newberry Road
Gainesville, Florida 32607

Please contact our office if any additional assistance is needed in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Kimberly Kinsell".

Kimberly Kinsell
Corporate Counsel

Tel: 352-224-1637
Fax: 352-224-1650
Email: kekinsell@lifesouth.org

anf
Enclosure

4039 Newberry Road
Gainesville, Florida 32607

352-224-1600
352-224-1650 Fax

Toll Free 1-888-795-2707
www.lifesouth.org



Headquarters

4039 Newberry Road
Gainesville, Florida 32607

352-224-1600
352-224-1650 Fax

Toll Free 1-888-795-2707
www.lifesouth.org

October 3, 2007

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Registration No.: T97000000495

Enclosed please find the new mark application for the above referenced registration number for LifeSouth Community Blood Centers, Inc. for filing. Per our previous request for renewal we attached a check for \$96.25 that should now apply to the new registration.

Please do not hesitate to contact our offices should you have any further requests or questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Kimberly Kinsell".

Kimberly Kinsell
Corporate Counsel

Tel: 352-224-1637
Fax: 352-224-1650
Email: KEKinsell@lifesouth.org

anf
Enclosure



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2007

KIMBERLY KINSELL, ESQUIRE
LIFESOUTH COMMUNITY BLOOD CENTERS
4039 NEWBERRY ROAD
GAINESVILLE, FL 32607

SUBJECT: LIFESOUTH & DESIGN OF THE WORD "LIFESOUTH" AS ONE
WORD WITH "OUTH" LOWERCASE, AND A SMALL HEART ABOVE THE "U"
Ref. Number: W07000051038

We have received your document for LIFESOUTH & DESIGN OF THE WORD
"LIFESOUTH" AS ONE WORD WITH "OUTH" LOWERCASE, AND A SMALL
HEART ABOVE THE "U" and your check(s) totaling \$96.25. However, the
document has not been filed and is being retained in this office for the following:

In lieu of returning your document, we have corrected your document to reflect
the appropriate class(es). Your mark falls under class(es) (44).

The specimens provided this office are not acceptable; we need three permanent
specimens, **which may be the same or different**. We do not accept camera
ready copies. We do not accept specimens which have been altered or defaced
in any manner. In order to register your service mark, we need specimens from
which we can determine the services being rendered. We will accept brochures,
newspaper, or magazine advertisements, or business cards. If business cards
are used, we must be able to determine from the business card the services
offered. The mere mark, address, city, etc., on the business card, brochure, or
advertisement is not acceptable -- we must be able to look at the specimens
provided and be able to determine the services being rendered. We need
specimens for each class of registration. We DO NOT accept letterhead,
stationery, envelopes, invoices or mailing labels.

Please attach your specimens to a copy of this letter or to your corrected
application, if it was returned to you for correction(s), and return it/them to this
office for processing.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if
the applicant fails to reply or resubmit the corrected/amended application within
three months from date of this letter.

If you have any questions concerning the filing of your document, please call
(850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 007A00060519

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LifeSouth
(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:

Kim Kinzell
(Name of Person)

LifeSouth Community Blood Centers, Inc.
(Firm/Company)

4039 Newberry Road
(Address)

Gainesville FL 32607
(City/State and Zip Code)

For further information concerning this matter, please call:

Kim Kinzell at (352) 224-1637
(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: LifeSouth Community Blood Centers, Inc.
(b) Applicant's business address: 4039 Newberry Road
Gainesville, FL 32607
City/State/Zip

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

- (c) Applicant's telephone number: (352) 224-1600
 Individual Corporation Joint Venture Limited Liability Company
 General Partnership Limited Partnership Union Other: _____

- If other than an individual,
(1) Florida registration/document number: 729802 ~~797000000495~~ (2) Domicile State: Florida
(3) Federal Employer Identification Number: 39-1545914

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.)
Blood banking and related services.

(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.)
n/a

(c) The specific way the mark is applied to the good(s) or used in advertising:(i.e., labels, decals, newspaper advertisements, brochures, etc.)
Printed promotional materials including t-shirts, posters, banners, pamphlets, signage and printed advertisements.
d) The class(es) in which goods or services fall:

2-0044

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: 1/14/1997 (b) Date first used in Florida: 1/14/1997

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.)

LIFESouth. Design LIFESouth as one word with "outh" in lowercase, and a small heart above the "o" (See Attached)

English Translation n/a

2. DISCLAIMER (if applicable)

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

I, Kimberly Kinsell, 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 thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, 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.

Kimberly Kinsell
Typed or printed name of applicant

[Signature]
Applicant's signature
(List name and title)

STATE OF FLORIDA

COUNTY OF ALACHUA

On this 3rd day of OCTOBER, 2007, KIMBERLY E. KINSELL personally appeared before me,

[X] who is personally known to me [] whose identity I proved on the basis of

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

(Seal)



Gladys A McMillan
My Commission DD332498
Expires June 26, 2008

[Signature]
Notary Public Signature

GLADYS A. McMILLAN
Notary's Printed Name

My Commission Expires: June 26, 2008

FILING FEE: \$87.50 per class

FOR HER SAKE

Patients like her are
depending on donors
like you.

LifeSouth needs 90
apheresis donors every day.

Please call (888) 795-2707
to schedule your apheresis
appointment today.



TAKE THE NEXT STEP
AND BECOME AN APHERESIS DONOR.

LIFESouth
Community Blood Centers