# 708000000900

(	Request	or's Name)	)		
(	Address	)			
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(	City/Sta	te/Zip/Phor	ne #)		
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# Renewal 708-900

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JUN 25 2013 N. CAUSSEAUX

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Ten Years Younger	
(Name of Mark Registered)	
Dear Sir or Madam:	
The enclosed Mark Renewal Application, specimen and fee(s) are submitted for filing	g.
Please return all correspondence concerning this matter to the following:	
Steven Masley	
(Name of Person)	
Ten Years Younger	
(Firm/Company)	
1016 39th Ave North	
(Address)	
St. Petersburg, FL 33703	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Kim Escarraz	
(Name of Person) (Area Code & Daytime Telephone Num	ber)

#### STREET/COURIER ADDRESS:

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

#### MAILING ADDRESS:

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

FILING FEE: \$87.50 per class CERTIFICATE OF RENEWAL: \$ 8.75 (OPTIONAL)

( $\underline{NOTE}$ : The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

CR2E005 (1/11)

### MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:	Return To: Division of Corporations
Steven Masley	P.O. Box 632
1016 39th Ave North	22 L
St. Petersburg, FL 33703	施里で
T	Ounger State of the state of th
1) Mark Registered: Ten Years Ye	ouriger
2) Registration Number: T0800000	900
3) Date Filed: 08/01/2008 4.) Renew	val Date: 8/1/2013 5.) Class(es) Filed: 5 & 44
	5.071, Florida Statues. Below you must state the mark is still in
	onuse is not due to any intention to abandon the mark.
The mark is still in use	in Florida
7) If the mark is still in use, a specimen show	wing actual use of the mark is included with this application.
	state of incorporation/formation/organization:
o) if applicant is a business entity, enter the	state of meorporation/formation/organization:
	Steven Masley
	Typed or Printed Name of Owner
•	Tum Masley
STATE OF Florida	Owner's Signature or Authorized Person's Signature
COUNTY OF Pinellas	
Sworn to and subscribed before me on this	day of June, 13, STEVEN MASCEY (Name of Individual Signing)
who is personally known to me whose	
Paul P Ziegler	
STATE OF FLORIDA	Notary Public Signature
Expires 7/8/2017	Paul P. Ziebler
Fee: \$87.50 Per Class Certificate of Renewal: \$8.75 (Optional)	Notary Public's Printed Name
CR2E005 (1/11)	





# TEN YEARS YOUNGER for Medical Practitioners

## TEN YEARS YOUNGER

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STEVEN MASLEY, M.D.

A Complete Program for your Medical Practice:

- Maximize time
- Increase revenue
- Improve patient's lives!

Steven Masley, M.D., FAAFP, CNS
President, Masley Optimal Health Center
Medical Director, Ten Years Younger Program
900 Carillon Parkway, Suite 300 St. Petersburg, FL 33716
T (727) 299-9222 F (727) 299-9322

info@drmasley.com

www.drmasley.com

www.tenyearsyounger.com

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An Amazing ten-week plan to

Look better,
Feel better and
Turn back the clock.....





### FOR MEDICAL PRACTITIONERS:

Discover the *Ten Years Younger Program* which will enable <u>YOUR</u> patients to lose weight, build fitness and strength, improve blood sugar and cholesterol levels, and enhance their cognitive performance. Proven, published data shows this program works.

A complete program developed for your use.

Help your patients

- Reverse Type 2 Diabetes
- Eliminate Symptoms of Cardiovascular Disease
- Reduce Cholesterol
- Lower Blood Pressure
- Promote Weight Loss

Use <u>Group Sessions</u> to maximize your time, increase revenue and improve patients lives!