778000000894

| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ad | ldress) | |
| DA) | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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K. SALY MAY 2 6 2023

COVER LETTER

| TO: Registration Section Division of Corporations | | | , |
|---|--|--|-----------------|
| Oesign of H "Tamarac" ale SUBJECT: "Tamarac" ale | ovizontal R nove a wan your life" | ectangle with The w y Line, above The | marapo o vol |
| 4) (| Same of Mark Registe | red) | |
| Dear Sir or Madam: | | | |
| The enclosed Mark Renewal Application | n, specimen and fee(s) |) are submitted for filing. | |
| Please return all correspondence concern | ning this matter to the | following: | |
| HANS OTTINOT, ESQ., CITY ATTO | ORNEY | | |
| (Name of Person) | | - | |
| CITY OF TAMARAC | | | |
| (Firm/Company) | | | |
| 7525 NW 88TH AVENUE | | | |
| (Address) | | | |
| TAMARAC, FL 33321 | · | | |
| (City/State and Zip Cod | le) | | |
| For further information concerning this | matter, please call: | | |
| HANS OTTINOT | 786- at () | 202-1136 | |
| (Name of Person) | | aytime Telephone Number) | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 | | |
| | | se Florida 32314 | |

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

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

CR2E005 (1/20)

Tallahassee, Florida 32303

MARK RENEWAL APPLICATION

| Name and Mailing Address of Owner: | Return To: Division of Corporations | |
|---|--|--|
| CITY OF TAMARAC | P.O. Box 6327 Tallahassee, FL 32314 | |
| 7525 NW 88TH AVE, TAMARAC FL 33321 | Design of Horizontal 1) Mark Registered: <u>Restangle with The word</u> "Tamaras" above a war | |
| 2) Registration Number: T18000000894 | « City for your dife " | |
| | enewal Date: 8/31/2023 5.) Class(es) Filed: 0041 | |
| | n 495.071, Florida Statues. Below you must state the mark is still in use onuse is not due to any intention to abandon the mark. | |
| | | |
| 7) If the mark is still in use, a specimen | showing actual use of the mark is included with this application. | |
| 8) If applicant is a business entity, enter | the state of incorporation/formation/organization: FLORIDA | |
| Fee: \$87.50 Per Class Certificate of Renewal: \$8.75 (Optional) | Typed or Printed Name of Owner Owner Signature or Authorized Person's Signature | |
| STATE OF FLORIDA COUNTY OFBROWARD | | |
| Sworn to (or affirmed) and subscribed before numeric date) this the following day of day of day of and day of | me by means of physical presence or online notarization, this APRIL ,2023, by (LEVENT SUCUOGLU). month year name of person making statement | |
| REGINA M. SKENANDORE MY COMMISSION # HH 128063 EXPIRES: May 10, 2025 Bonded Thru Notary Public Underwriters | Notary Public's Signature Regina Skinandore Notary Public's Printed Name Notary Public Pub | |
| ersonally Known 🗹 OR Produced Identifi | cation | |
| Type of Identification Produced: | cation The Control of | |
| UR2E005 (1/20) | — C` | |

2023

City of Tamarac RESIDENTIAL ASSISTANCE PROGRAM Round 6

The Residential Assistance Program assists with mortgage, rent, utility payments, and past due HOA fees. The program will remain open until funds are exhausted. The City of Tamarac will administer the program with the assistance of a consultant, Civitas, LLC.

STARTING APRIL 3, 2023, APPLICATIONS AVAILABLE AT WWW.TAMARAC.ORG/HOUSING.

PLEASE NOTE THE FOLLOWING:

- incomplete applications will not be considered.
- Applicants must have a verifiable and documented income hardship as a direct result of COVID-19.
- This is a one-time assistance opportunity based on payments owed and/or past due.
- Payments will not exceed six (6) months and \$5,000.
- Funds are awarded as grants.
- Checks will be made payable to Landlord, Mortgage Lender and/or Utility Provider(s).



The City For Your Life



Michelle J. Gomez



Morey Wright, Jr. District 2 Commissioner



Elvin Villalobos District 3 Commissioner



Dr. Kicia Daniel District 4 Commissioner