T19000002258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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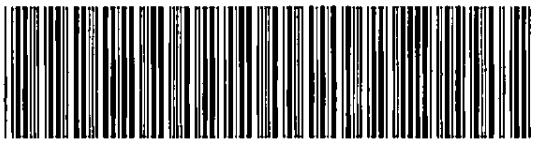

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TALLAHASSEE, FLORIDA

K. SALY
AUG 19 2019

JOSEPH R. CASACCI, P.A.

Attorney at Law

111 N. PINE ISLAND ROAD, SUITE 104
PLANTATION, FLORIDA 33324

JOSEPH R. CASACCI

Telephone: (954) 474-7447
Facsimile: (888) 600-6520
E-Mail: info@casaccilaw.com

August 12, 2019

VIA FEDERAL EXPRESS
 # 7759 5768 7580

Registration Section
DIVISION OF CORPORATIONS
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: ***Assignment of Mark Registration of Jimbo's Sandbar*** **to**
20/20 Hospitality Group, LLC.
Florida Registration Number: T19000000258

Our File Number: 19-4999

Dear Sir/Madam:

Enclosed herewith please find the Cover Letter and Assignment of Mark Registration to assign the mark of Jimbo's Sandbar from Jimbo's Sand Bar, Inc. to 20/20 Hospitality Group, LLC. A duplicate copy of the Assignment of Mark Registration has been enclosed for certification to be returned to my office with the Certificate.

Also, enclosed is our firm's check number 3040 in the amount of Fifty ($50.00) Dollars made payable to Florida Department of State representing the assignment fee.

Please return the filed stamped copy of the Assignment of Mark Registration and Certificate to our office in the enclosed self-addressed, stamped envelope. Thank you for your assistance in this regard.

If you have any questions, please contact my office.

Very truly yours,

JOSEPH R. CASACCI
For the Firm

JRC/sl
encl

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jimbo's Sandbar
(Name of Mark to be assigned)

Dear Sir or Madam:

The enclosed Mark Assignment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph R. Casacci, Esq
(Name of Person)

Joseph R. Casacci, P.A.
(Firm/Company)

111 N Pine Island Road, Suite 104
(Address)

Plantation, FL 33324
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph R. Casacci at (954) 474-7447
(Name of Person) (Area Code & Daytime Telephone Number)

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: $50 per class

ASSIGNMENT OF MARK REGISTRATION

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TALLAHASSEE, FLORIDA

1. The mark to be assigned is: Jimbo's Sandbar
2. Registration Number: T19000000258
3. (a) Assignor's name: Jimbo's Sand Bar, Inc

(b) Assignor's Business Address: 6200 N Ocean Drive

Hollywood, FL 33019
City/State/Zip

If Different, Assignor's Mailing Address: 3015 N Ocean Blvd, Suite 122

Fort Lauderdale, FL 33308
City/State/Zip

4. (a) Assignee's name: 20/20 Hospitality Group LLC

(b) Assignee's Business Address: 6200 N Ocean Drive

Hollywood, FL 33019
City/State/Zip

If Different, Assignee's Mailing Address: 1604 SE 10 Street

Fort Lauderdale, FL 33316
City/State/Zip

(c) Assignee's telephone number: (954) 401-1325

☐ Individual ☐ Corporation ☐ Joint Venture ☑ Limited Liability Company

☐ General Partnership ☐ Limited Partnership ☐ Union ☐ Other: _____

If other than an individual.

(1) Florida registration/ document number: L19000168289 (2) Domicile State: Florida

(3) Federal Employer Identification Number: _____

5. All right, title and interest in and to said mark, together with the good will of the business in which the mark is used (or that part of the good will of the business connected with the use of and symbolized by the mark) is hereby

assigned by Jimbo's Sand Bar, Inc (the Assignor) to 20/20 Hospitality Group LLC (the Assignee).

6. Assignor's Signature: _____ President

By Egidio S. Oliveto
(Typed or Printed Name of Person Signing Above)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sworn to and subscribed before me on this 8 day of August, 2019 by Egidio S. Oliveto
(Name of Individual Signing)

☑ who is personally known to me ☐ whose identity I proved on the basis of _____

(Notary Seal)

WILLIAM J. MCPHARLIN
MY COMMISSION # GG 314228
EXPIRES: March 19, 2023
Bonded Thru Notary Public Underwriters

_____
Signature of Notary Public

7. Assignee's Signature: _____ Manager

By Daniel G. Serafini
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this 8th day of August, 2019 by Daniel G. Serafini
(Name of Individual Signing)

☑ who is personally known to me ☐ whose identity I proved on the basis of _____

(Notary Seal)

ANASTASIA LEMBOTESIS
MY COMMISSION # GG 048102
EXPIRES: November 16, 2020
Bonded Thru Notary Public Underwriters

_____
Signature of Notary Public

FILING FEE: $50 per class
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314