

T23000000922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

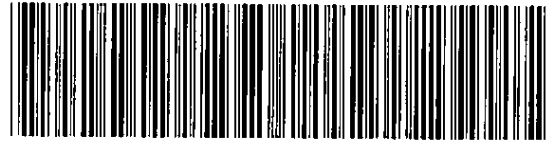
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CALLER  
PERMISSION GIVEN TO CORRECT  
DOCUMENT BY CRAIG WEINER  
ON THIS DATE 10/13/2023  
KS

Office Use Only



100417134201

FILED  
OCT 11 2023

10/12/23--01006--093 \*\*87.50

RECEIVED  
OCT 12 2023

K. SALY

OCT 13 2023

10/11

October 9, 2023

Karen Saley  
Florida Department of State  
Service Mark Application

Dear Ms. Saly

Please find enclosed the following :

1. One original and one photocopy of the application (2 in total)
2. Check for \$87.50 payable to the Florida Department of State
3. Three business cards reflecting the actual logo (service mark) and that the use is for a Museum

Note : I wasn't sure how to complete the Disclaimer section since every word within our service mark is a common word such as "Museum", or South", etc. So, in order not to take a chance or lose time, I added each word of our name as a disclaimed word. I hope I did the right thing. If not, please call me (954-270-8020).

Please allow me to provide both my email address and telephone number just in case I inadvertently omitted something. If so, can you please send me an email or give me a call in order to avoid losing time by going back and forth in the mail. I tried my best to do everything correctly and really hope that I did.

If everything is filed correctly, I would be very grateful if you could either give me a call or send an email to let me know that it's all fine.

Thanks so very much for your help.



Craig Weiner  
954-270-8020

Email : [crwo1@icloud.com](mailto:crwo1@icloud.com) (Note that it is the letter o and not the number 0 in my email address. Thanks very much).

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OCT 11 2023

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Holocaust Museum of South Florida  
\_\_\_\_\_  
(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:

CRAIG WEINER  
\_\_\_\_\_  
(Name of Person)

HOLOCAUST LEARNING AND EDUCATION FUND, INC.  
\_\_\_\_\_  
(Firm/Company)

3064 BIRKDALE  
\_\_\_\_\_  
(Address)

WESTON, FLORIDA 33332  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

CRAIG WEINER    954                          270-8020  
\_\_\_\_\_  
(Name of Person)    at ( \_\_\_\_\_ )    \_\_\_\_\_  
(Area Code & Daytime Telephone Number)

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**(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**

FILED  
23 OCT 11 AM 11:50  
TALLAHASSEE, FL

**PART I**

1. OWNER/APPLICANT: Enter the name and address of the individual or the business entity to be listed as the owner of the Trademark and/or Service Mark on the records of the Florida Department of State.

(a) Owner's/Applicant's name: HOLOCAUST LEARNING AND EDUCATION FUND, INC.

(b) Owner's/Applicant's business address: 3064 BIRKDALE  
WESTON, FLORIDA 33332  
City/State/Zip

If different, Owner's/Applicant's mailing address: \_\_\_\_\_  
City/State/Zip

(c) Owner's/Applicant's telephone number: ( ) 954-270-8020

Check the appropriate box to indicate the Owner/Applicant is a(n):

- Individual       Corporation       Joint Venture       Limited Liability Company  
 General Partnership       Limited Partnership       Union       Other: \_\_\_\_\_

If the Owner/Applicant is a business entity, the business entity must have an active filing or registration on file with the Florida Department of State. If the Owner/Applicant is not an individual, enter the business entity's Florida registration/document number in #1, the state or country under the laws of which the business entity is currently formed, organized or incorporated under in #2, and the entity's federal employer identification number (EIN) in #3.

(1) Florida registration/document number: N1300006479

(2) Domicile State or Country: FLORIDA

(3) Federal Employer Identification Number: 46-3296698

2. (a) **SERVICE MARK:** If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with a type of service, the mark is a service mark. If the mark is a service mark, the applicant/owner must list the specific service(s) the mark is being used in connection with. For example: furniture moving services, diaper services, house painting services, wholesale and retail sales of tractor equipment, etc. If the owner/applicant is using the mark to identify services available in the market place, enter the specific service(s) being rendered here:

(Note: List only those services currently being rendered by the owner/applicant. Do not include future services.)

HOLOCAUST MUSEUM OPEN FOR EDUCATION FOR STUDENTS AND TEACHERS AND THE GENERAL PUBLIC.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. (b) TRADEMARK: If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with an actual product manufactured by the owner/applicant or on the owner/applicant's behalf, the mark is a trademark. If the mark is a trademark, the applicant/owner must list the specific product(s) the name, logo, design and/or slogan is being used to identify. For example: ladies sportswear, cat food, barbecue grills, shoe laces, etc. If the owner/applicant is using the name, logo, design and/or slogan to identify goods available in the market place, enter the specific product(s) the name, logo, design and/or slogan is being used to identify:

(Note: List only those product(s) currently available. Do not include future products.)

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MAY 11 2011  
FIDELITY

2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY USED:

SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connection with a type of service, you must specify the form(s)/mean(s) of advertisement the applicant/owner is using to advertise the services to the general public. For example: newspaper advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a type of service, state how the name, logo, design and/or slogan are/is being used in advertising here:

THE NAME "Holocaust Museum of South Florida" IDENTIFIES THIS SPECIFIC MUSEUM WHICH HAS ITS

THE NAME (SERVICE MARK) IS ADVERTISED ON THE INTERNET, ON BUSINESS CARDS (ENCLOSED),

AND ON FLYERS AND BROCHURES AS NEEDED.

TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a product manufactured by or for the applicant/owner, you must specify how the mark is applied or affixed to the actual product or its packaging. For example: a tag, label, imprinted or engraved on the actual product, etc. If the mark is being used in connection with a specific product, state how the name, logo, design and/or slogan is applied or affixed to the actual product(s) or the packaging:

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2. (d) FEE(S) AND CLASS(ES): There are a total of 45 classes or categories in which all products or services must be categorized. The fee to register a mark is \$87.50 per class. Make check payable to Florida Department of State.

List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and/or 2(b) above:

CLASS 41

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**PART II**

1. You must state the date the name, logo, design and/or slogan was first used in the state of Florida, and, if it was used in another state or country, the date you first used the name, logo, design and/or slogan in the other state or country. Enter the month, day, and year the name, logo, design and/or slogan was first used by the applicant/owner, the predecessor, or a related company in Florida. If the name, logo, design and/or slogan has been used in another state or country, then you must also enter the month, day, and year the name, logo, design and/or slogan was/were used in another state or country, when applicable.

**Note: The Florida Statutes require a mark to be in use prior to registration.**

(a) Date first used in other state or country, if applicable: 03/14/2023

(b) Date first used in Florida: 03/14/2023

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MARCH 14 2023  
FILED

**PART III**

**ENTER NAME, LOGO, DESIGN AND/OR SLOGAN BEING REGISTERED:**

1. Enter the name, a brief description of the logo or design, and/or the slogan you are registering. The description of the logo and/or design must be 25 words or less. List the exact name, slogan, and/or description of the logo/design here: (NOTE: The name, logo, design and/or slogan listed in this section must match the exact name, logo, design and/or slogan listed on your specimens or examples.)

NAME : Holocaust Museum of South Florida

Provide the English translation of any and all terms listed #1 above, when applicable: \_\_\_\_\_

2. **DISCLAIMER STATEMENT** (if applicable):

Your mark may include a word or design that is commonly used by others. Commonly used terms or designs must be disclaimed. When you disclaim a specific term or design, you are acknowledging this term is commonly used by others and that you do not claim the exclusive right to use the disclaimed term or design. All geographical terms and representations of cities, states or countries must be disclaimed (i.e., Miami, Orlando, Florida, the design of the state of Florida, the design of the United States of America, etc.). Corporate suffixes and terms readily associated with the specific product(s) and/or(s) service being provided must also be disclaimed.

Enter all terms listed in #1 above which require a disclaimer in the space provided below:

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM(S) "FLORIDA", "MUSEUM", "HOLOCAUST", "SOUTH". "OF" \_\_\_\_\_  
" APART FROM THE MARK AS SHOWN.

3. ATTACH OR INCLUDE THREE SPECIMENS OR EXAMPLES OF THE TRADEMARK OR SERVICE MARK BEING REGISTERED

Chapter 495, F.S., requires you to submit three specimens (samples or examples) of the mark in use. You must submit three specimens FOR EACH CLASS listed in Part I #2(d). The name, logo, design and/or slogan on the specimens must be identical to the name, logo, design and/or slogan being registered. You may provide three identical specimens or three different specimens. For each service mark class (classes 35-45), you may provide three newspaper advertisements, business cards, brochures, flyers, or any combination thereof. For each trademark class (classes 1-34), you may provide three tags, labels, boxes, etc. or any combination thereof. Photographs of bulky specimens are acceptable if the mark being registered and the good(s) or product(s) are clearly legible.

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2023 OCT 11 AM 11:51  
TALLAHASSEE

SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:

I, CRAIG WEINER, 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.

HOLOCAUST LEARNING AND EDUCATION FUND, INC

Typed or printed name of applicant

Applicant's signature  
(List name and title)

CRAIG WEINER, PRESIDENT

STATE OF MAINE  
COUNTY OF York

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this (numeric date) this 10 day of October, 2023 by (Craig Weiner).

Notary Public's Signature

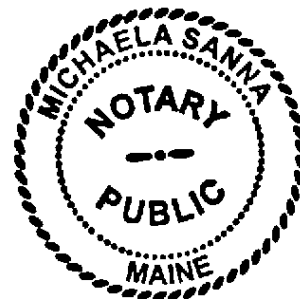
Michaela Sanna

Notary Public's Printed Name

Personally Known  OR Produced Identification  Maine Drivers license

Type of Identification Produced: Maine Drivers license

**FILING FEE: \$87.50 per class**



MICHAELA SANNA  
NOTARY PUBLIC  
State of Maine  
My Commission Expires  
March 20, 2026

MICHAELA SANNA  
NOTARY PUBLIC  
State of Maine  
My Commission Expires  
March 20, 2026

Craig R. Weiner  
President

Tel: (954) 389-9000

## **Holocaust Museum of South Florida**

Holocaust Learning and  
Education Fund, Inc.

[www.Holocausteducationfund.com](http://www.Holocausteducationfund.com)

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