

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DAVID R. ELLIS, ATTORNEY
Account Number : I19990000151
Phone : (727)531-1111
Fax Number : (727)531-5088

Trademark/Service mark Registration
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Trademark/Service mark Filing
Menu

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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

2008 DEC 28 PM 4:29
FILED
TALLAHASSEE, FLORIDA

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: PIKOS INSTITUTE OPCO, LLC

(b) Owner's/Applicant's business address: 2711 Tampa Road

Palm Harbor, FL 34684

City/State/Zip

If different, Owner's/Applicant's mailing address:

City/State/Zip

(c) Owner's/Applicant's telephone number: (727) 782-0491

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: V31862

(2) Domicile State or Country: Florida

(3) Federal Employer Identification Number: 59-3120586

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.)

Educational services, namely conducting courses, classes, seminars, and workshops, live and online, in the field of dental and

oral implant and maxillofacial surgery and dental implant reconstruction, and distribution of course and educational

materials in connection therewith.

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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.)

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:

Printed brochures and Internet website

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:

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 4:

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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: _____

(b) Date first used in Florida: January 26, 2017

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.)

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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)" _____

" APART FROM THE MARK AS SHOWN.

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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 1 #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.

SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:

I, Michael Pikos

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/its 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.

PIKOS INSTITUTE OPCO, LLC

Typed or printed name of applicant

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

STATE OF FLORIDA

COUNTY OF Polk

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this (numeric date) 18th day of December, 2023 by Michael A. Pikos (name of person making statement).



Sonya Faye Black

Notary Public's Signature

Sonya Faye Black

Notary Public's Printed Name

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: Drivers License

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Demystifying Full Arch Immediate Load Therapy – Level I AKA: All on XYZ



COURSE OVERVIEW

ALL NEW COURSE!

31 Credit Hours

Learn Predictable and Evidence-Based Full Arch Surgical and Restorative Protocols

This 4-hour foundational course will cover the most current state of the art, evidence-based principles, concepts and technology available for full arch immediate load therapy. It represents Level I of the Full Arch Series at Pikos Institute.

The full spectrum of diagnosis and treatment planning and the surgical restorative and lab workflow, along with comprehensive case presentations will be presented in a most efficient, practical and seamless mode. It will include intensive lecture discussion on anatomy and digital protocols, hands-on surgical workshop, hands-on restorative workshop, live surgery and dedicated sessions on hygiene maintenance and complications.

This one-of-a-kind course will feature an all-star speaker-based faculty of oral surgeons, oral dentists and lab technicians. You don't want to miss this one!

Multi-Specialty Faculty for this Comprehensive Course are:

SURGICAL

Dr. Michael A. Pikos - Oral Surgeon
Dr. David Lee, III - Oral Surgeon

Dr. Philip J. Hedger - Prosthodontist
Dr. Sefa Tanmassek - Prosthodontist

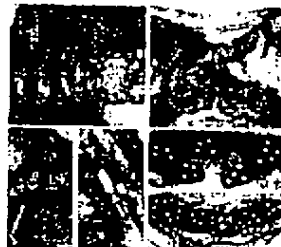
LAB

Mr. Taylor Toff - Digital Lab Technician

Maxillary Full-Arch Case Using
Photogrammetry, L-PRF



Maxillary Full-Arch with Autogenous Bone Graft,
Photogrammetry, L-PRF



AFTER THIS COURSE ATTENDEES WILL:

1. Understand the key evidence-based concepts and protocols required for diagnosis and treatment planning full arch immediate load case types
2. Understand the complete step-by-step surgical, restorative (surgical and digital) and lab components of full arch workflow
3. Learn a comprehensive hygiene maintenance program for full arch patients
4. Understand the recognition, prevention and treatment of complications associated with full arch immediate load case types

UPCOMING COURSE DATES

Register for March 20-23, 2024

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