P99000002213

Requester's Name

Address

City/State/Zip Phone #

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99 FEB 22 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Frequent Orchid Program (31)
(Corporation Name) (Document #)

2. 789/747/740/671
(Corporation Name) (Document #)
35 Frequent Orchid Program

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of ~~Status~~

P99000002213

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

500002753525--6
-01/25/99--01098--005
*****87.50 *****87.50

099-2134

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Name Availability	NJC
Document Examiner	NJC
Updater	NJC
Updater Verifyer	NJC
Acknowledgement	NJC
W. P. Verifyer	NJC

Examiner's Initials

CR2E031(7/97)

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 28, 1999

PHILIP GLATZER, ESQ.
15851 SW 198 AVENUE
MIAMI, FL 33187

SUBJECT: FREQUENT ORCHID PROGRAM
Ref. Number: W99000002134

We have received your document for FREQUENT ORCHID PROGRAM and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Class(es) (35) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (35).

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: FREQUENT, ORCHID PROGRAM

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6918.

Nanette Causseaux
Corporate Specialist Supervisor

Letter Number: 599A00003771

To: Nanette Causseaux
Division of Corporations
P.O.Box 6327
Tallahassee, Florida 32314

February 11, 1999.

Re: Ref. Number: W99000002134
Frequent Orchid Program

Dear Ms. Causseaux:

Please note the changes for our application as requested and process as soon as possible.

Thank you.

Sincerely,

Jose L. Exposito
Soroa Orchids, Inc.
15851 S. W. 198th Avenue
Miami, Fl. 33187-1043

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Name & address to whom acknowledgement should be sent:

Philip Glatzer, Esq.
145 Almeria Avenue
Coral Gables, FL 33134
(305) 446-1200
Daytime Telephone number

PART I

1. (a) Applicant's name: Soroa Orchids, Inc.

(b) Applicant's business address: 15851 SW 198 Avenue

Miami, FL 33187
City/State/Zip

(c) Applicant's telephone number: (305) 232-6766

☐ Individual ☒ Corporation ☐ Joint Venture ☐ Other: _____
☐ General Partnership ☐ Limited Partnership ☐ Union

If other than an individual,

(1) Florida registration number: M15569 (2) Domicile State: Florida

(3) Federal Employer Identification Number: 592536386

2.(a) If the mark to be registered is a service mark, the services in connection with which the mark is used: (i.e., furniture moving services, diaper services, house painting services, etc.)

Growing and selling orchids

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used: (i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

(c) The mode or manner in which the mark is used:(i.e., labels, decals, newspaper advertisements,brochures, etc.)

Brochures, Advertisements, Flyers

(Continued)

(d) The class(e) in which goods or services fall:

(35) Advertising and Business

PART II

1. Date first used by the applicant, predecessor, or a related company(must include month, day and year):

(a) Date first used anywhere: December 29, 1998 (b) Date first used in Florida: December 29, 1998

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

Frequent Orchid Program

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. DISCLAIMER (if applicable)
NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "Frequent, Orchid, Program" APART FROM THE MARK AS SHOWN.

I, Jose Exposito *, 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 no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. 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.*

Soroa Orchids, Inc.
Typed or printed name of applicant

Jose Exposito, PRES.
Applicant's signature or authorized person's signature
(List name and title) Jose Exposito, President

STATE OF Florida

COUNTY OF Miami-Dade

On this 12 day of January, 19 99, Jose Exposito personally appeared before me,

☐ who is personally known to me
☒ whose identity I proved on the basis of DRIVER'S LICENSE E212 432 60 361 0

Natalie Ruiz.
Notary Public Signature

Natalie Ruiz
My Commission CC790685
Expires November 12, 2002

Natalie Ruiz
Notary's Printed Name

Seal

My Commission Expires: 11/12/02

FEE: $87.50 per class

SOROA ORCHIDS, INC.
FREQUENT ORCHID PROGRAM

Soroa Orchids invites you to become a member of our new Frequent Orchid Program, where you can earn valuable points on all of your Soroa plant purchases and exchange them for FREE orchids!

- Membership is open to individuals. Corporate accounts are not eligible.
- Membership is free of charge. Purchase is required to earn points.
- Simply complete the attached application form and return it to Soroa Orchids.
- Once you have spent $500.00 in a 24 consecutive month membership period, you will receive a Reward Voucher which may be redeemed for free orchid plants(valued up to USD 50.00).
- Just present your membership card or membership number at Soroa Orchids nursery, or at events at which Soroa Orchids is a participant, and you'll be on your way to FREE orchids.

OTHER TERMS AND CONDITIONS

- Reward Vouchers have no cash value, and are valid for a one-time use.
- Points cannot be transferred from one membership period to the next, nor combined with another Member's points.
- Soroa Orchids, Inc. at its sole discretion, reserves the right to change the program rules, terms, conditions and limitations or to cancel the program entirely at any time, without prior notification.

Please allow 2-4 weeks to receive your membership credentials.

FREQUENT ORCHID PROGRAM APPLICATION

Name: _____ Address: _____

City: _____ St./Prov. _____ Zip/Postal Code: _____ Country _____

Tel. ( ) _____ Fax. ( ) _____ Email.: _____