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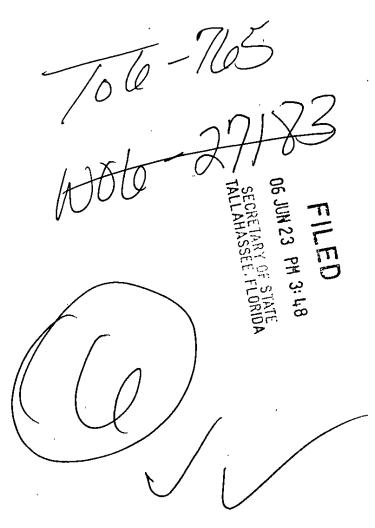
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#### **COVER LETTER**

Division of Corporations
SUBJECT: 90ld coastwebdesign. com 1050 (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:
Michael J. Caruso
(Name of <b>Person)</b>
goldwaf webdesign. com
Clum Company)
Po Box 195
Boca Ratur, FL 33429
(City State and Zip Code)
For further information concerning this matter, please call:
Michael J. Caroso at (561 417.7117 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)

#### MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 14, 2006

MICHAEL J. CARUSO GOLDCOASTWEBDESIGN.COM P.O. BOX 195 BOCA RATON, FL 33429

SUBJECT: DESIGN OF A BOLD LETTER "G" WITH DESIGNATED CUTOUTS

SUPERIMPOSED AND CENTERED IN A FILLED CIRCLE

Ref. Number: W06000027183

We have received your document for DESIGN OF A BOLD LETTER "G" WITH DESIGNATED CUTOUTS SUPERIMPOSED AND CENTERED IN A FILLED CIRCLE and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Class(es) (35 & 42) 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 & 42).

In Part I(2)(c) you must state how the mark is being used. If the mark is a trademark, you can cite labels, decals, tags, imprints on goods, etc. If the mark is a service mark, you can cite business cards, newspaper advertisements, TV and radio advertisements, etc.

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) 245-6918.

Letter Number: 606A00040388

Nanette Causseaux Document Specialist Supervisor

## ION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK Pursuant to Chapter 495, Florida Statutes TO: **Division of Corporations** Name & address to whom acknowledgment should be sent: Post Office Box 6327 Tallahassee, FL 32314 oca Katon Daytime Telephone number (b) Applicant's business address: City/State/Zip If different, Applicant's mailing address: City/State/Zip (c) Applicant's telephone number: ( Individual Corporation Joint Venture ☐ Other: General Partnership Limited Partnership Union If other than an individual, (1) Florida registration/document number: (2) Domicile State: (3) Federal Employer Identification Number: 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.) (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.)

(Continued)

The class(es) in which goods or services fall:
35- Advertising + Business 38- Communication 43- MISCOLLANGOUS
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: 1/1/03 (b) Date first used in Florida: 1/1/63
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.)
1090 included is a bold letter 'G' with designated
cutouts superimposed and centered in a filled circle.
English Translation
2. DISCLAIMER (if applicable)  NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "  "APART FROM THE MARK AS SHOWN.  I
be mistaken therefor. I make this affidavit and verification on mythe applicant's behalf. I further acknowledge that have read the application and know the contents thereof and that the facts stated herein are true and correct  Michael Cacup
Typyd or printed name of applicant  Applicant's signature
STATE OF Florido (List name and title)
COUNTY OF POIN BROCH
On this 6th day of June, 2006, Michael Caruso personally appeared before me.  Who is personally known to me whose identity I proved on the basis of
Notary Public Signature  Oct 16, 3 to 1
Adriana Moreno  Notary's Printed Name  My Commission Expires: August 16, 2009

FEE: \$87.50 per class

### goldcoastwebdesign.com



Michael J. Caruso



www.goldcoastwebdesign.com PO Box 195 : Boca Raton : Florida : 33429

E:info@goldcoastwebdesign.com P:954-360-4101