

T18000000883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

W18-61868

(Business Entity Name)

(Document Number)

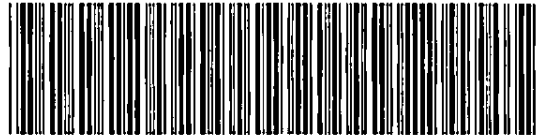
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

corrections PER CONVERSATION  
with LISA FRICK 8/30/2018  
KS

Office Use Only



000315141510

06/28/18--01019--019 \*\*87.50

FILED  
18 AUG 22 AM 1:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

AUG 30 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 5, 2018

LISA FRICK  
JOAN'S WISH FOUNDATION, INC.  
1858 WOODHAVEN CIRCLE  
SARASOTA, FL 34232

SUBJECT: INFINITE HEROES  
Ref. Number: W18000061808

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

This mark has already been registered, see attached print-out. If you are trying to register the name and logo. You need to make the corrections requested in this letter.

We are unable to determine your class(es) at this time. Please amend your application to reflect the specific good(s) and/or service(s) the mark is being used in connection with.

Because the specific good(s) and/or service(s) will determine the applicable class(es), please note additional filing fees may be due this office. If so, you will be advised accordingly.

You must list a more specific service in #2(a) in Part I of the application.

If the mark includes a logo or design, a brief written description must be provided. In this description, we do not need an explanation of what the logo or design symbolizes or represents.

The specimens provided this office are not acceptable; we need three permanent specimens, **which may be the same or different**. We do not accept camera ready copies. We do not accept specimens which have been altered or defaced in any manner. In order to register your service mark, we need specimens from which we can determine the services being rendered. We will accept brochures, newspaper, or magazine advertisements, or business cards. If business cards are used, we must be able to determine from the business card the services offered. The mere mark, address, city, etc., on the business card, brochure, or advertisement is not acceptable -- we must be able to look at the specimens provided and be able to determine the services being rendered. We need specimens for each class of registration. We **DO NOT** accept letterhead, stationery, envelopes, invoices or mailing labels.

Please attach your specimens to a copy of this letter or to your corrected application, if it was returned to you for correction(s), and return it/them to this office for processing.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux  
Regulatory Specialist II Supervisor

Letter Number: 918A00013887



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2018

LISA FRICK  
JOAN'S WISH FOUNDATION, INC.  
1858 WOODHAVEN CIRCLE  
SARASOTA, FL 34232

SUBJECT: INFINITE HEROES  
Ref. Number: W18000061808

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

You have indicated in number 1(c) of Part I of the application that the owner and applicant of the mark will be a business entity and not an individual. Therefore, you must delete the individual's name listed in number 1(a) of Part I and insert the correct name of the appropriate business entity.

Class(es) 41 & 45 would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) 41 & 45.

There is a balance due of \$87.50.

Because your mark falls under more than one class, you must submit three specimens for each class. Please provide three specimens for class(es) 41 & 45.

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) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 318A00016380

2018 AUG 22 PM 2:55  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Infinite Heroes  
(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:

Lisa Frick  
(Name of Person)

Joan's Wish Foundation, Inc.  
Infinite Wishes Foundation  
(Firm/Company)

1838 WOODHAVEN CIRCLE  
(Address)

SARASOTA, FL 34232  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Frick at (941) 809-7697  
(Name of Person) (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**  
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

(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

FILED  
18 AUG 22 AM 1:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TO: Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

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: Joan's Wish Foundation, Inc.

(b) Owner's/Applicant's business address: 1858 Woodhaven Circle  
Sarasota, FL 34232  
City/State/Zip

If different, Owner's/Applicant's mailing address: N/A  
City/State/Zip

(c) Owner's/Applicant's telephone number: 941 809-7697

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: N15000000125

(2) Domicile State or Country: FL

(3) Federal Employer Identification Number: 47-2703833

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.)

ADULT VETERANS WISH FULFILLING - COMBAT - WOUNDED / AMPUTEES & ACTIVE  
MILITARY W/ LIKE THREATENING ILLNESSES

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:

PROMOTIONAL MATERIALS, SHIRTS, COFFEE MUGS, OTHER ITEMS, ADS, SOCIAL MEDIA

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:

WEBSITE, BUSINESS CARDS, FLYERS, PAMPHLETS, PRINT ADS, BANNERS,  
SOCIAL MEDIA, CLOTHING & GOODS

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:

N/A

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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18 AUG 22 AM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: N/A

(b) Date first used in Florida: JUNE 22, 2018

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18 AUG 22 AM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.)

INFINITE HEROES - DESIGN OF IMAGE OF STYLIZED IMAGE  
OF EAGLE (LOGO) LANDING W/ WINGS OUTSTRETCHED  
LANDING ON "INFINITE HEROES" NAME BELOW

Provide the English translation of any and all terms listed #1 above, when applicable: N/A

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)" HEROES

"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.

SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:

I, Lisa Frick, 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.

Lisa Frick

Typed or printed name of applicant

[Signature]

Applicant's signature  
(List name and title)

STATE OF

FLORIDA

COUNTY OF

MANATEE

Sworn to and subscribed before me on this

25<sup>th</sup>

day of

JUNE

2018.

LESA FRICK

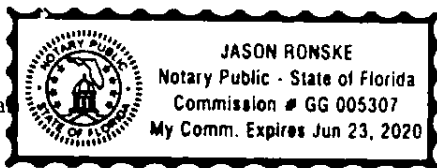
(Name of Individual Signing)

☐ who is personally known to me

☒ whose identity I proved on the basis of

U.S. PASSPORT

(Seal)



[Signature]

Notary Public Signature

JASON RONSKE

Notary's Printed Name

My Commission Expires:

6-23-20

FILING FEE: \$87.50 per class

FILED  
18 AUG 22 AM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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Greg Robinson, SFC  
Assistant Director  
Infinite Heroes Program  
Florida/New Jersey

(618) 499-2655  
infinitewishes.org  
501(c)(3) Nonprofit  
infiniteheroesorg@gmail.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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TALLAHASSEE, FLORIDA



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