

(Requestor's Name) (Address)	
(Address)	500013266645 Ace Painting & des.
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	03/05/0301027008 **87.50
(Business Entity Name)	03/05/0301027008 **87.50 slogan don't gamble W/40 Paintingneeds "(37)
(Document Number)	
Certified Copies Certificates of Status	150
Special Instructions to Filing Officer: 789/ 2929/304/67/	W03 350
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Ace Painting, Pain Part 71/10 too	PHIZ: 24
Part 71/10 too 6 Mall to image pls	use



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 6, 2003

HOWARD A. CAPLAN, ESQUIRE 3900 ATLANTIC BLVD. JACKSONVILLE, FL 32207

SUBJECT: ACE PAINTING AND DESIGN OF LEFT HAND HOLDING FANNED CARDS ACE ON TOP WITH SLOGAN: "DON'T GAMBLE WITH YOUR

PAINTING NEEDS!"

Ref. Number: W03000006521

We have received your document for ACE PAINTING AND DESIGN OF LEFT HAND HOLDING FANNED CARDS ACE ON TOP WITH SLOGAN: "DON'T GAMBLE WITH YOUR PAINTING NEEDS!" and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the term(s) DON'T GAMBLE WITH YOUR PAINTING NEEDS is/are to be included as part of the mark registration, you must include the term(s) in #1 of Part III of the application.

The small type you have in Part III will not image properly. Please use larger type in Part III of your application. We will need a disclaimer in Part III #2 for the following: "ACE PAINTING", "PAINTING".

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: 703A00014269

Nanette Causseaux Corporate Specialist Supervisor

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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 acknowledgment should be sent:

Howard A. Caplan, Attorney, PA
3900 Atlantic Blyd.
Jacksonville, FL 32207
(904) 346-1670 Daytime Telephone number
PART I
l. (a) Applicant's name: Ace Painting Contractors, Inc.
(b) Applicant's business address: 13125 Dunn Creek Road
Jacksonville, FL 32218 City/State/Zip
(c) Applicant's telephone number: (904) 714-3717
☐ Individual ☐ Corporation ☐ Joint Venture ☐ Other:
☐ General Partnership ☐ Limited Partnership ☐ Union
If other than an individual,
(1) Florida registration number: <u>P97000068906</u> (2) Domicile State: <u>F1orida</u>
(3) Federal Employer Identification Number: 593465887
 (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.)
Painting Services, namely, residential, commercial, and industrial.
(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.,
Business cards, letterhead, employee shirts, truck sides, telephone
directory, and newspaper advertising.
(Continued)

Class 37				
	• •	PART II		
1. Date first used by the applicant	t, predecessor, or a	related company (must incl	ude month, day a	nd year):
(a) Date first used anywhere:	3/15/96	(b) Date first used in	Florida: 3/1	.5/96
The mark to be registered is: (I must be 25 words or less.)	f logo/design is in	PART III cluded, please give brief wri	tten description v	vhich
Hand holding cards A	kce high un	der "Don't Gamble	With Your	Paintin
Needs all left of "	'Ace Painti	ng" with diamond	under "Ace	, 11
English Translation				
2. DISCLAIMER (if applicable) NO CLAIM IS MADE TO THE Painting Needs", "Ace	Painting"	" APART FRO	M THE MARK	AS SHOWN.
I Howard A. Caplan herein, or that I am authorized to sign on the right to use such mark in Florida eith be mistaken therefor. I make this affida application and know the contents thereo	er in the identical Jori vit and verification or	n or in such hear resemblance as mv/the applicant's behalf. I fur	to de aken to acceiv	e or confuse of ic
Hama	Applicant's signatur	ontractors. Inc. printed name of applicant Howard A. caplar or authorized person's signature st name and title)	Attorney	_
STATE OF Florida	·	,		3 MAR
COUNTY OF <u>Duval</u>			-	20 °
On this 14th day of March	<u> </u>	2003 , Howard A.	Caplan	
appeared before me,	_			75
who is personally known to	me 🗀 whose	identity I proved on the bas	is of	
				
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ichael Lee				