

T0000 0000 305

Requester's Name

Address

City/State/Zip

Phone #

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00 MAR 17 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

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

(41)

1. Florida Center for the Arts and Education Inc.
(Corporation Name) (Document #)

2. 189/758/672
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

T-305

☐ Walk in ☐ Pick up time _____
☐ Mail out ☐ Will wait ☐ Photocopy

☒ Certified Copy
☒ Certificate of Status

NEW FILINGS

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

(7)

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

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

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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Name	NP
Availability	
Document Examiner	NJC
Section	NJC
Updater Verifier	NJC
Acknowledgement	NJC
W. P. Verifier	NJC

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 9, 2000

JON H. SOMSEN, ESQ.
CITY OF ORLANDO, OFFICE OF LEGAL AFFAIRS
400 S. ORANGE AVE.
ORLANDO, FL 32801

SUBJECT: FLORIDA CENTER FOR THE ARTS AND EDUCATION INC.
Ref. Number: W00000003511

We have received your document for **FLORIDA CENTER FOR THE ARTS AND EDUCATION INC.** and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have reviewed your application and have determined that the information inserted in Part III is merely a tradename or fictitious name. Therefore, we are enclosing a Fictitious Name Registration Packet for you to complete and return to this office. The fee to register a fictitious name is \$50. If the check(s) submitted to cover the registration of your mark was retained in this office, please return the completed fictitious name application to the attention of the examiner indicated below so your money will be properly credited.

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

Nanette Causseaux
Corporate Specialist Supervisor

Letter Number: 700A00006639



CITY OF ORLANDO

February 16, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Nanette Causseaux
Corporate Specialist Supervisor

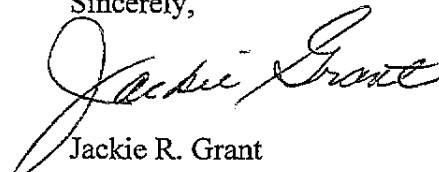
Re: W00000003511
Florida Center for the Arts and Education, Inc.

Dear Ms. Causseaux:

Pursuant to your instructions to me during our telephone conversation on this date, I have enclosed the corrected application for Registration of a Trademark or Service Mark for FLORIDA CENTER FOR THE ARTS AND EDUCATION, INC. Our check number 2002 in the amount of \$87.50 for the original registration along with the required three samples (business cards) were not returned to us. Therefore, I am assuming they are being held for the corrected Application.

If further information or materials are needed to complete this application, please contact me at the enclosed address or phone number. Thank you for your assistance in this matter.

Sincerely,


Jackie R. Grant
Paralegal

Enclosures
cc: J. Somsen

OFFICE OF LEGAL AFFAIRS

CITY HALL • 400 SOUTH ORANGE AVENUE • ORLANDO, FLORIDA 32801-3302
PHONE (407) 246-3494 • FAX (407) 246-2854 • email: Jacqueline.grant@ci.orlando.fl.us



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 28, 2000

JON H. SOMSEN, ESQ.
CITY OF ORLANDO, OFFICE OF LEGAL AFFAIRS
400 S. ORANGE AVE.
ORLANDO, FL 32801

SUBJECT: FLORIDA CENTER FOR THE ARTS AND EDUCATION INC.
Ref. Number: W00000003511

We have received your document for FLORIDA CENTER FOR THE ARTS AND EDUCATION INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In our telephone conversation I advised that you must include a design/logo along with the wording in order to register your mark. I also advised you would have to add a disclaimer, which you have done.

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: 500A00010645



CITY OF ORLANDO

March 7, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Nanette Causseaux
Corporate Specialist Supervisor

Re: W00000003511
Florida Center for the Arts and Education, Inc.

Dear Ms. Causseaux:

Pursuant to your instructions to me during our telephone conversation on this date, I have added the description of the logo for FLORIDA CENTER FOR THE ARTS AND EDUCATION, INC. According to your previous correspondence, you have our check number 2002 in the amount of \$87.50 for the registration along with the required three samples (business cards).

If further information or materials are needed to complete this application, please contact me at the enclosed address or phone number. Thank you for your assistance in this matter.

Sincerely,

Jackie R. Grant
Paralegal

Enclosures
cc: J. Somsen

OFFICE OF LEGAL AFFAIRS

CITY HALL • 400 SOUTH ORANGE AVENUE • ORLANDO, FLORIDA 32801-3302
PHONE (407) 246-3494 • FAX (407) 246-2854 • email: Jacqueline.grant@ci.orlando.fl.us

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:

City of Orlando

ATTN: Jon H. Somsen, Esq.
400 S. Orange Ave., Office of Legal Affairs

Orlando, FL 32801

(407) 246-3477
Daytime Telephone number

PART I

1. (a) Applicant's name: City of Orlando
- (b) Applicant's business address: c/o Jon H. Somsen, Esq.
400 S. Orange Ave., Office of Legal Affairs
Orlando, FL 32801
City/State/Zip
- (c) Applicant's telephone number: (407) 246-3477
- ☐ Individual ☐ Corporation ☐ Joint Venture ☒ Other: Municipal Corp.
☐ General Partnership ☐ Limited Partnership ☐ Union
- If other than an individual,
- (1) Florida registration number: Municipal Corp. (2) Domicile State: Florida
- (3) Federal Employer Identification Number: 59-6000396

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.)

Education and entertainment center for the performing arts (music, drama, opera, dance,
ballet, 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.)

N/A

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

(Continued)

the class(es) in which goods or services fall:

41 - educational and entertaining

PART II

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

Date first used anywhere: 10/21/98 (b) Date first used in Florida: 10/21/98

PART III

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

FLORIDA CENTER FOR THE ARTS AND EDUCATION, INC. with logo of stick like figures
entwined to resemble the trunk of a tree.

DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " "FLORIDA" "CENTER" "ARTS AND
EDUCATION" " APART FROM THE MARK AS SHOWN.

Jon H. Somsen, being sworn, depose and say that I am the owner and the applicant
therein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has
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

Jon H. Somsen, Assistant City Attorney, City of Orlando

Typed or printed name of applicant

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

STATE OF FLORIDA

COUNTY OF ORANGE

On this 3rd day of February, 2000, JON H. SOMSEN
appeared before me,

☒ who is personally known to me ☐ whose identity I proved on the basis of _____

FILED
00 MAR 17 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAR 17 AM 9:39

personally

[Signature]
Notary Public Signature

Brenda C. Robinson
Executive on Loan

Florida Center for the
Arts and Education
400 South Orange Ave.
Orlando, FL 32801

TEL: 407.246.3278
FAX: 407.246.3434
email: arts@ci.orlando.fl.us

Commission Expires: _____

7.50 per class

Notary Printed Name

