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Address	SECRETARY OF STATE TALLAHASSEE, FLARIDA
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CORPORATION NAME(S) & DO	CUMENT NUMBER(S), (if known):
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Reinstatement
Trademark
Other



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 25, 2000

WILLIAM O'NEIL, JR. 6720 NW 65 PLACE OCALA, FL 34482

SUBJECT: ELECTRONIC ADDICTIONS

Ref. Number: W00000010781

We have received your document for ELECTRONIC ADDICTIONS 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) (9) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (9).

We need three permanent specimens, which may be the same or different. TYPED, HANDWRITTEN or PHOTOCOPIED MATERIALS ARE NOT ACCEPTABLE. We do not accept specimens which have been ALTERED or DEFACED. ANY SIZE SPECIMENS ARE ACCEPTABLE. If your mark falls under the classification of a trademark (classes 1-34), we need the labels, tags, decals, containers, boxes, wrappers or 3 LEGIBLE photographs of the goods or products with the specimen affixed. IF YOUR MARK FALLS UNDER THE CLASSIFICATION OF A SERVICE MARK (CLASSES 35-42), WE NEED SPECIMENS FROM WHICH WE CAN DETERMINE THE SERVICE(S) BEING RENDERED. We will accept magazine and-or newspaper advertisements, brochures or business cards. If business cards are submitted, we must be able to determine the services being rendered. If your mark falls under the classification of both a trade and service mark, we need specimens for both. WE WILL NOT ACCEPT LETTERHEAD STATIONERY, ENVELOPES OR INVOICES AS SPECIMENS.

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: 900A00022499

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:
	William ONeil To
	6720 NU 105P1
	Ocala 41 34487
	(35Q) 867-0152
	Daytime Telephone number
	PARTI
1. (a) Applicant's name: William (Neil 50
(b) Applicant's business address:	NWL5P1
Deal	10 41 alles
(c) Applicants tolerans and (350)	City/State/Zip
(c) Applicant's telephone number: (350)	<u>(U)~ ()/3 5</u>
General Partnership Limited Partner	□ Joint Venture □ Other:
If other than an individual,	Simp Comon
(1) Florido mariatural de 1	(2) Domicile State:
(3) Federal Employer Identification Number:	(-) 2 states state.
· · · · · · · · · · · · · · · · · · ·	the services in connection with which the mark is used: es, house painting services, etc.)
retail sales of Co	nouter extense and
Video games.	TEN STIME (MIC
<i>U</i>	
(b) If the mark to be registered is a trademark, the (i.e., ladies sportswear, cat food, barbecue gril	e goods in connection with which the mark is used: ls, shoe laces, etc.)
computer software a	and video games
•	0
(c) The mode or manner in which the mark is use	d:(i.e., labels, decals, newspaper advertisements, brochures, etc.)
labels business conda	100 > 00 00 50 ml find the state of the stat
labels, business cards,	I KNOSTERPER WO, IMEMET
Activertising, yellow pac	ges ad
	Continued)
,	~ variation j

d) The class(es) in which goods or services falls. URSS 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: 15-2000 (b) Date first used in Florida: 1-15-2000
1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.) The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)
English Translation_
2. DISCLAIMER (if applicable) NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " Flection C "APART FROM THE MARK AS SHOWN. I,
Applicant's signature or authorized person's signature (List name and title)
COUNTY OF
Deborah L. Davis Commission # 00 868452 Expires Sep. 1, 2003 Bonded Thru Atlantic Bonding Co., Inc. Debor at L Davis Notary Public Signature Debor at L Davis Notary's Printed Name My Commission Expires: 520 1, 2003

FEE: \$87.50 per class

Electronic Addictions

Authorized distributor of computer software and video games

6720 NW 65th Place Ocala, FL 34482 (352) 867-0153

Email: BNH010899@aol.com