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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 21, 2000

A-1 LOCKSMITH 4675 KELLY DR WEST PALM BEACH, FL 33415

SUBJECT: A-1 LOCKSMITH AND DESIGN OF A PADLOCK AND A KEY IS

SUPERIMPOSED OVER THE PADLOCK

Ref. Number: W00000023102

We have received your document for A-1 LOCKSMITH AND DESIGN OF A PADLOCK AND A KEY IS SUPERIMPOSED OVER THE PADLOCK and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: A-1, LOCKSMITH

Class(es) 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) 42.

Please sign and return your check along with this document in order to complete your filing.

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) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 000A00049879

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK

	Pursuant to Chapter	495, FLORIDA STATUTES
]	Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	Name & address to whom acknowledgment should be sent:
		A-1 LOCKSMITH
		War vally DC
		4615 KEII9 DI.
		W.P.B, FL B3415
		(561) 964-6114 Daytime Telephone number
		PARTI
1. (a) A	Applicant's name: A-1 Locksmith	n Service of the Palm Beaches, Inc
(b) A	Applicant's business address: 4675	Kelly Drive
	West F	Palm Beh FL 33415
(c) A	Applicant's telephone number: (561)	9104-1d14 City/State/Zip
	Individual Corporation	□ Joint Venture □ Othe
	General Partnership	ship DUnion AR C
If other	than an individual,	J. AS - □
(1) Flori	rida registration number: V00654	(2) Domicile State: FL FR 5
(3) Fede	leral Employer Identification Number:	5-0302045
2. (a) I		the services in connection with which the markers used:
	Locksmith Services	•
	LUCAININ SEIVIUS	
	. 24 21	
(b) If	If the mark to be registered is a trademark, the (i.e., ladies sportswear, cat food, barbecue gril	goods in connection with which the mark is used: lls, shoe laces, etc.)
		d: (i.e., labels, decals, newspaper advertisements, brochures, etc.)
	Advertisements, Flyers,	truck signage, T-Shirts (work
	ints)	
	-	
(0)	(01.1.210	Continued)

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: 12/16/91 (b) Date first used in Florida: 12/16/91
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.) A-1 Locksmith with a Padlock and a key is Super-imposed over the padlock
English Translation
2. DISCLAIMER (if applicable) NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " A CKSMITH SECURCE" APART FROM THE MARK AS SHOWN. I, VAN R. SCHWEIDER 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 no other person except a retated company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive a confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that Thave read the application and know the contents thereof and that the facts stated herein are true and correct
Typed or printed name of applicant Typed or printed name of applicant Applicant's signature or authorized person's signature
STATE OF FLORIDA COUNTY OF PALM BEACH (List name and title)
On this 13 th day of September 20 00, VAN R-Schweiser personally appeared before me, Who is personally known to me whose identity I proved on the basis of
(Seal) Notary Public Signature Fighw D LuRTz Notary's Printed Name
My Commission Expires:
FEE: \$87.50 per class

OFFICIAL NOTARY SEAL
JOHN D KURTZ
COMMISSION NUMBER
CC688960
MY COMMISSION EXPIRES
NOV. 8,2001

