

701000000804

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUL 30 PM 2:36

Requester's Name _____

Address _____

City/State/Zip _____ Phone # _____

Office Use Only

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

1. 789/740/762/671
(Corporation Name) (Document #)
2. Dade
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

900004536939-5
-06/01/01-01046-003
787.50 **87.50

- Walk in
- Mail out
- Pick up time _____
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

NEW FILINGS

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

4

AMENDMENTS

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

np
~~W01-13642~~

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

701-804

*Sent VHS cassette
tape of show*

CR2E031(7/97)

Examiner's Initials _____



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 14, 2001

MARLENE MINGO
MIAMI-DADE TV
111 NW 1ST ST., SUITE 2510
MIAMI, FL 33128

SUBJECT: DOWNTOWN DADE
Ref. Number: W01000013642

We have received your document for DOWNTOWN DADE 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: DADE

The specimens provided this office are not acceptable; we need three permanent specimens, which may be the same or different. We do not accept photocopies or 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 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) 487-6051.

Nanette Causseaux
Corporate Specialist Supervisor

Letter Number: 701A00036484

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:

Marlene Mingo- Miami-Dade TV
111 NW 1st Street, Suite 2510
Miami, FL 33128

(305) 375-3733
Daytime Telephone number

PART I

1. (a) Applicant's name: Miami-Dade Television / Miami-Dade County

(b) Applicant's business address: 111 NW 1st Street, Suite 2510

Miami, Fl 33128
City/State/Zip

(c) Applicant's telephone number: (305) 375-3733

Individual Corporation Joint Venture Other: Government
 General Partnership Limited Partnership Union

If other than an individual,

(1) Florida registration number: 23-08-329851-53C (2) Domicile State: Florida

(3) Federal Employer Identification Number: 59-6000573

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.)

Television programs used to promote services rendered or
offered to the public by Miami-Dade County.

(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.)

NA

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

Placement and posting in various forms of television programming,
schedules and guides.

(Continued)

d) The class(es) in which goods or services fall:

Class 41

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: March 25, 1991 (b) Date first used in Florida: March 25, 1991

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.)

DOWNTOWN DADE

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " _____ " APART FROM THE MARK AS SHOWN.

I, Marlene Mingo, 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 related 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 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

Miami-Dade Television / Miami-Dade County

Typed or printed name of applicant

[Handwritten Signature]

Program Coordinator

Applicant's signature or authorized person's signature

(List name and title)

STATE OF Florida

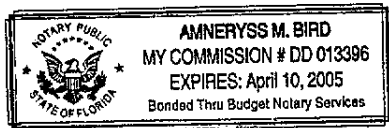
COUNTY OF Miami-Dade County

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 JUL 30 PM 2:37

On this 24 day of May, 19 2001, Marlene Mingo personally appeared before me,

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

(Seal)



[Handwritten Signature]

Notary Public Signature

Amneryss M. Bird

Notary's Printed Name

My Commission Expires: April 10, 2005

FEE: \$87.50 per class