|  | 0000000859  FILETO SECRETARY OF STATE DIVISION OF CORPORATIONS  PLANTAL AM IN: 07   |
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|  | Address   |
|  | 1000045601415<br>-08/28/0101067018  |
| City/State/Zi  | ip Phone # Office Ose Only 50 ******87.50   |
| CORPORATION N  | AME(S) & DOCUMENT NUMBER(S), (if known):  |
| R  | Bithlonian (28)?  |
| 1. (Corpo  | ration Name) 2880 (Document #)  |
| 2. <b>(6)</b>  | 85/135/146/14/143/149/6/1   |
| (Corpo   | ration Name) (Document)   |
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| Mail out  NEW FILINGS  Profit  | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent   |
| Mail out  NEW FILINGS  Profit  NonProfit   | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent   |
| Mail out  NEW FILINGS  Profit  NonProfit  Limited Liability  | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent   |
| Mail out  NEW FILINGS  Profit  NonProfit  Limited Liability  Domestication  Other  | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent   |
| Mail out  NEW FILINGS  Profit  NonProfit  Limited Liability  Domestication   | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/  |
| Mail out  NEW FILINGS  Profit  NonProfit  Limited Liability  Domestication  Other  | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/ QUALIFICATION  QUALIFICATION                                     |
| Mail out  NEW FILINGS  Profit  NonProfit  Limited Liability  Domestication  Other  OTHER FILINGS  Annual Report  Fictitious Name | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/  |
| Mail out  NEW FILINGS  Profit  NonProfit  Limited Liability  Domestication  Other  OTHER FILINGS  Annual Report                  | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/ QUALIFICATION  Foreign  Limited Partnership                |
| Profit NonProfit Limited Liability Domestication Other  OTHER FILINGS Annual Report Fictitious Name                              | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/ QUALIFICATION  Foreign  Limited Partnership  Reinstatement |
| Profit NonProfit Limited Liability Domestication Other  OTHER FILINGS Annual Report Fictitious Name                              | Pick up time Certified Copy  Will wait Photocopy Certificate of Status  AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION Foreign Limited Partnership Reinstatement                         |



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 20, 2001

MARTHA D. JONES BITHLO ETC., INC. 2621 10TH ST. ORLANDO, FL 32820

SUBJECT: BITHLONIAN Ref. Number: W01000003971

We have received your document for BITHLONIAN, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

You have indicated in number 1(c) of Part I of the application that the owner and applicant of the mark will be a business entity and not an individual. Therefore, you must delete the individual's name listed in number 1(a) of Part I and insert the correct name of the appropriate business entity.

In Part III, you must write the exact wording of the mark. If the mark includes a logo or design, a brief written description must be provided.

Class(es) (25) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (25).

In Part II(1) a & b we need a month, a day, and a year for the date the mark was first used anywhere and for the date it was first used in Florida.

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: 401A00010577



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 3, 2001

MARTHA D. JONES BITHLO ETC., INC. 2621 10TH ST. ORLANDO, FL 32820

SUBJECT: BITHLONIAN Ref. Number: W01000003971 WOI- 16393

We have received your document for BITHLONIAN and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

If the mark includes a logo or design, a brief written description must be provided.

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.

Nanette Causseaux Corporate Specialist Supervisor

Letter Number: 201A00039608



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 17, 2001

MARTHA D. JONES BITHLO ETC., INC. 2621 10TH ST. ORLANDO, FL 32820

SUBJECT: BITHLONIAN AND DESIGN OF A SMILEY FACE

Ref. Number: W01000016393

We have received your document for BITHLONIAN AND DESIGN OF A SMILEY FACE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

If the mark includes a logo or design, a brief written description must be provided.

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.

If the design of the "SMILEY FACE" is to be included in Part III, we must have a brief written description of the design in Part III. If it is not to be included please delete it from Part III of the application. We need three specimens which include the design. Acceptable specimens are business cards, brochures or newspaper ads. (3 of the same is fine)

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.

Nanette Causseaux

## OR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK PURSUANT TO CHAPTER 495, FLORIDA STATUTES Division of Corporations Post Office Box 6327 TO: Tallahassee, FL 32314 Name & address to whom acknowledgment should be sent: Daytime Telephone number PART I 1. (a) Applicant's name: (b) Applicant's business address: (c) Applicant's telephone number: (407 ☐ Other: ☐ Joint Venture Corporation ■ Individual Union ☐ Limited Partnership ☐ General Partnership If other than an individual, (2) Domicile State: Florida (1) Florida registration number: P000000 10096 (3) Federal Employer Identification Number: 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.) (b) If the mark to be registered is a trademark one 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.)

(Continued)

| d) The class(es) in which goods or services fall;       |   |
|---|---|
| - Class 35  | •   |
|   |   |
|   | PART II   |
| 1. Date first used by the applicant, predecessor, o     | r a related company (must include month, day and year):   |
| (a) Date first used anywhere: 6/01/01                   | (b) Date first used in Florida: 6/0//0/   |
| •   | 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.)                              |   |
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| *0.00   | 1 mile is design 25   |
| English Translation Line William                        | San Zoca  |
| 2. DISCLAIMER (if applicable)                           | TO THE TENANT   |
| NO CLAIM IS MADE TO THE EXCLUSIVE                       | " APART FROM THE MARK AS SHOWN.   |
| 1 A T M   |   |
|   | being sworn, depose and say that I am the owner and the behalf of the owner and applicant herein, and no other person except a lorida either in the identical form or in such near resemblance as to be   |
| related company has the right to use such much in-T     | fortial entire in the second and |
| further acknowledge that I have read the application of | or. I make this affidavit and verification of mystis application and and know the contents thereof and that the facts stated herein are true and  |
| Correct   | Etc. Inc.   |
| Туре  | ed or printed name of applicant   |
| matha   | Donnelly James ( bosistered   |
| Applicant's si  | gnature or authorized person's signature (List name and title)  |
| STATE OF OF 100   | · · · · · · · · · · · · · · · · · · ·   |
| COUNTY OF Orange  |   |
| On this 1412 day of JUNE                                | 1 2001 MARTHA DONNEY JOPpersonally  |
| on this // they or                                      | - Dayswarm of   |
|   | hose identity I proved on the basis of Washing Or   |
| FLORIDA DANVERS LICEN                                   | 56  |
| # 1520-546-6  | Hotary Public Signature   |
| (Seal)  | Gary R. Williams  |
| (Dom)   | Commission # CC 315576  |
|   | Bonded Thru Atlantic Bonding Co., Inc. My Commission Expires:   |
|   | ALA COMMINOSION TUDITOR   |

FEE: \$87.50 per class

| STATE OF FLORIDA   | Subscribed and sworn to (or affirmed) before me this(Date)  |
|--|---|
| COUNTY OF <b>RANGE</b>   | by MARIJA Donney Forth who is/are personally known to me or   |
|  | has/have produced F1. Dalvens License as identification.  Cary R. Williams # T 520-546-49-847-0  Commission # CC 815575  Expires Apr. 22, 2003  Bonded Thru  Atlantic Bonding Co., Inc., State of Florida Notary Pubic, Commission No. CC815576 |
| Notary ID# 598982  | (Signature)   |
| (SEAL ABOVE)   | ·   |
| ATTENTION NOTARY: Although the inform                                    | ation requested below is OPTIONAL, it could prevent fraudulent attachment of this certificate to unauthorized document.   |
| THIS CERTIFICATE  MUST BE ATTACHED  TO THE DOCUMENT  DESCRIBED AT RIGHT: | Number of Pages 2 Date of Document 10/14/2001  Signer(s) Other than Named Above No Orders Northwest   |



