T02000000002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Assignment
T02-2

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ABSOLUTE TRANSPORTATION SERVICES
(Name of Mark to be Assigned)

Dear Sir or Madam:

The enclosed Mark Assignment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN DONOVAN
(Name of Person)

BLUE CHIP CORPORATE TRANSPORTATION, INC.
(Firm/Company)

2107 BELLCREST CT.
(Address)

WEST PALM BEACH, FL 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN DONOVAN at (561) 575-1450
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ASSIGNMENT OF MARK REGISTRATION

1. The mark to be assigned is: ABSOLUTE TRANSPORTATION SERVICES

Registration Number: T02000000002

2. ASSIGNOR:
Name: ABSOLUTE TRANSPORTATION SERVICES, INC.

If Assignor is a corporation, the state in which incorporated & FL registration/document number:

FL / P01000027588

Address: 358 OAK AVE.

City: TEQUESTA State/Zip: FL 33469

3. ASSIGNEE:
Name: BLUE CHIP CORPORATE TRANSPORTATION, INC.

If Assignee is a corporation, the state in which incorporated & FL registration/document number:

FL / P06000085884 ✓

Address: 2107 BELLCREST CT.

City WEST PALM BEACH, State/Zip FL 33411

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TALLAHASSEE, FLORIDA

4. All right, title and interest in and to said mark, together with the good will of the business in which the mark is used (or that part of the good will of the business connected with the use of the mark) is hereby assigned by ABSOLUTE TRANSPORTATION SERVICES, INC. to

(the Assignor)

BLUE CHIP CORPORATE TRANSPORTATION, INC.
(the Assignee)

(Assignor's Signature)

(Assignee's Signature)

By CLIFFORD W. MONTRY V.P.
(Typed or Printed Name of Person Signing Above)

By JOHN DONOVAN PRESIDENT
(Typed or Printed Name of Person Signing Above)

On this 15th day of SEPTEMBER, 2006, CLIFFORD W MONTRY & JOHN DONOVAN personally appeared before me,

☐ who is personally known to me

ZOSIMO R. ESPANTO
Notary Public - State of Florida
My Commission Expires Nov 3, 2008
Notary Seal
Commission # DD 368333
Bonded By National Notary Assn.

☑ whose identity I proved on the basis of SHOWING FLORIDA DRIVER'S LICENSES

Signature of Notary Public

Instructions: The assignment must be signed by both the assignee and the assignor. If a corporation, an officer of the corporation must sign. Both the assignee's and the assignor's signature must be acknowledged before a Notary Public. If you need assistance, call the Registration Section at (850) 245-6051.

FILING FEE: $50
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314