

102000000002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

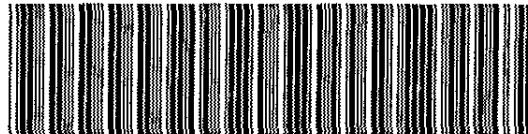
(Business Entity Name)

(Document Number)

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06 SEP 19 PM 2:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Assignment  
102-2

## 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 BELL CREST 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

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.

(the Assignor)

BLUE CHIP CORPORATE TRANSPORTATION, INC.  
(the Assignee)

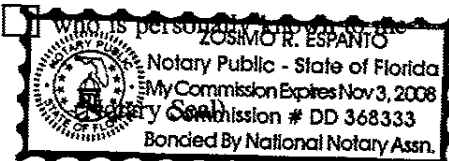
(Assignor's Signature)

(Assignee's Signature)

By CLIFFORD W. MONTROY 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 MONTROY & JOHN DONOVAN personally appeared before me,



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

Zosimo R. Espanto  
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

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE