

10300000/031

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(Address)

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103-1031

✓ ✓

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:

Gregory J. Blodig, Esquire
Greenspoon, Marder, Hirshfeld, Rarkin, Ross & Berg
100 W. Cypress Creek Road, Suite 700
Ft. Lauderdale, FL 33309
(954) 491-1120
Daytime Telephone number

PART I

1. (a) Applicant's name: Michael Gagliardi

(b) Applicant's business address: 2857 E. Oakland Park Blvd.

Ft. Lauderdale, FL 33306
City/State/Zip

(c) Applicant's telephone number: (954) 288-8081

☒ Individual ☐ Corporation ☐ Joint Venture ☐ Other:
☐ General Partnership ☐ Limited Partnership ☐ Union

If other than an individual,

(1) Florida registration number: N/A (2) Domicile State: _____

(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.)

Restaurant and Bar Services

(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.)

N/A

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

Advertisement, Brochures, Menus

(Continued)

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

Class 42

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: 9/1/2002 (b) Date first used in Florida: 9/1/2001

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.)

September's Restaurant & Nightclub

English Translation _____

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "September's",
"Restaurant", "Nightclub" "APART FROM THE MARK AS SHOWN.

I, Michael Gagliardi, 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

Michael Gagliardi

Typed or printed name of applicant

[Signature]
Applicant's signature or authorized person's signature
(List name and title)

STATE OF Florida

COUNTY OF Broward

On this 11th day of August, 2003, Michael Gagliardi
appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

(Seal)

[Signature]
Notary Public Signature



Debra Oppert

Notary Public Commission # DD070715 EXPIRES
November 16, 2005
BONDED THRU TROY FAIR INSURANCE, INC.

My Commission Expires: _____

FEE: \$87.50 per class

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personally

SEPTEMBER'S

restaurant
& nightclub

GIMME 'A BREAK'! I'M IN THE BUSINESS

September's has a special privilege card
for those in the hospitality industry.

\$2.00 DRINKS **EVERY**
Sun., Mon., Tues.

SEPTEMBER'S
restaurant
& nightclub

2975 North Federal Highway • Ft. Lauderdale
Call (954) 563-4331