

T0300000/207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

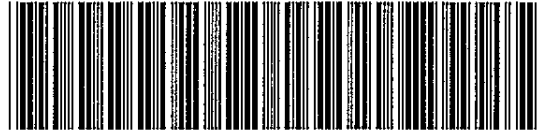
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500023034725

SARAFINA
9/9

09/18/03--01026--007 **175.00

(6)

W03-25708
T03-1207

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 25 PM 1:44

Requestor's Name	Office Use Only
Address	
City/State/Zip Phone #	

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

1. 685/747/304/1161/671
(Corporation Name) (Document #)
2. 35+41
(Corporation Name) (Document #)
3. Art Galleries fall in class 35, workshops
(Corporation Name) (Document #)
4. NO Money, 1 specimen fall und. class 4
(Corporation Name) (Document #)

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

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

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

W03-25708

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

✓✓

Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 9, 2003

SARAH LOWRY
1967 MORRILL STREET
SARASOTA, FL 34236

SUBJECT: SARAFINA
Ref. Number: W03000025708

We have received your document for SARAFINA, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$175.00.

Class(es) (35 & 41) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (35 & 41).

Art Galleries fall under class 35, art work shop services fall under class 41.

Section 495.031(4), F.S., requires the application for registration to be accompanied by three specimens or facsimiles. Although the specimen(s) you submitted with your application are acceptable, you neglected to send three. Please submit the additional specimens or facsimiles as required by law.

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
Document Specialist Supervisor

Letter Number: 303A00050122

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:

SARAH LOWRY
1967 MORRILL ST.
SARASOTA, FL 34236
(941) 363-0087
Daytime Telephone number

PART I

1. (a) Applicant's name: SARAH LOWRY

(b) Applicant's business address: 1967 MORRILL ST.

SARASOTA, FL 34236
City/State/Zip

(c) Applicant's telephone number: (941) 363-0087

Individual Corporation Joint Venture Other
 General Partnership Limited Partnership Union

If other than an individual,

(1) Florida registration number: _____ (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.)

ART GALLERY AND ART WORKSHOP 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.)

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

SIGNAGE, BROCHURES, DIRECT MAIL, WEBSITE AND
MAGAZINE/NEWSPAPER ADVERTISEMENTS. ALSO LABELS.

(Continued)

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

35 - ADVERTISING + BUSINESS

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: 09/01/03 (b) Date first used in Florida: 09/01/03

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.)

SARAFINA

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, _____, 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

SARAH D. Lowry

Typed or printed name of applicant

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

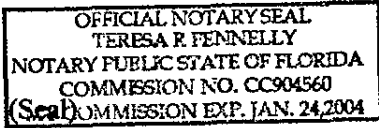
STATE OF Florida

COUNTY OF Sarasota

On this 5th day of September, 2003, Sarah D Lowry personally

who is personally known to me whose identity I proved on the basis of Driver's License

03 SEP 25 PM 11:15
SECRETARY OF STATE
DIVISION OF CORPORATIONS



[Signature]
Notary Public Signature
Teresa R Fennelly
Notary's Printed Name

My Commission Expires: _____

FEE: \$87.50 per class

Sarafina Studio

*Fine Art from Accomplished Artists in Oils, Acrylic,
Watercolor, Glass, Bronze and Photography*

Workshops in Drawing, Painting and Photography

*...in the Towles Court Artist Colony
1967 Morrill Street
Sarasota, Florida 34236
941-363-0087*
