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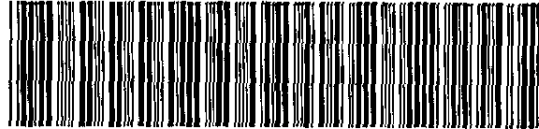
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ATTORNEYS AND COUNSELORS AT LAW

STEPHEN D. MARLOWE
JOSEPH V. MCNABB

324 S. HYDE PARK AVENUE
SUITE 210
TAMPA, FL 33606-4127
TELEPHONE: (813) 251-3013
FACSIMILE: (813) 251-5945
WWW.MARLOWEMCNABB.COM

December 20, 2004

Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, FL 32314

Re: Registration of Trademark or Service Mark

Dear Sir or Madam:

Enclosed please find an application for the Registration of a Trademark or Service Mark which has been executed by Comfort Central, Inc. Also enclosed is this firm's check in the amount of \$87.50 for fees.

If you have any questions or need any further information, please do not hesitate to contact me.

Sincerely yours,

A handwritten signature in cursive script that reads "Stephen D. Marlowe".

Stephen D. Marlowe

SDM/clh
Enclosure
cc: Daniel Rivera



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 23, 2004

STEPHEN D. MARLOWE, ESQUIRE
324 S. HYDE PARK AVENUE, SUITE 210
TAMPA, FL 33606-4127

SUBJECT: COMFORT CENTRAL
Ref. Number: W04000046825

We have received your document for COMFORT CENTRAL and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Class(es) (37) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (37).

Although we received your application and check(s), no specimens were included. Section 495.031(5), F.S., requires every trademark and/or service mark application to be accompanied by three specimens (or examples). Please submit three specimens for each class of registration. (NOTE: Letterhead, stationery, envelopes, invoices and mailing labels are not accepted.)

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) 245-6918.



ATTORNEYS AND COUNSELORS AT LAW

STEPHEN D. MARLOWE
JOSEPH V. MCNABB

324 S. HYDE PARK AVENUE
SUITE 210
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WWW.MARLOWEMCNABB.COM

January 5, 2005

Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, FL 32314

Attention: Nanette Causseaux
Document Specialist Supervisor

Re: COMFORT CENTRAL
Ref. Number: W04000046825
Letter Number: 604A00071252

Dear Ms. Causseaux:

Pursuant to your December 23, 2004, correspondence a copy of which is enclosed, we are resubmitting the Application of a Trademark or Service Mark, which now correctly reflects the applicable class for the Service Mark. Also enclosed are three (3) business cards reflecting the services rendered by Comfort Central.

Thank you for your assistance. If you need any further information, please do not hesitate to contact me.

Sincerely yours,

Stephen D. Marlowe

SDM/clh
Enclosures
cc: Daniel Rivera

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:

Daniel Rivera

Comfort Central, Inc.

9420 Lazy Lane, Ste. A-4 Tampa, FL

(813) 885-4448

Daytime Telephone number

PART I

1. (a) Applicant's name: Comfort Central, Inc.

(b) Applicant's business address: 9420 Lazy Lane, Suite A-12

Tampa, FL 33614

City/State/Zip

(c) Applicant's telephone number: (813) 885-4448

- | | | | |
|--|---|--|---------------------------------------|
| <input type="checkbox"/> Individual | <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Union | |

If other than an individual,

(1) Florida registration number: P02000003555 ✓ (2) Domicile State: Florida

(3) Federal Employer Identification Number: 010573816

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.)

Heating and air conditioning installation and repair

(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.)

Newspaper advertisements, website, cards, motor vehicles

(Continued)

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

37

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: January 10, 2002 (b) Date first used in Florida: January 10, 2002

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.)

Comfort Central

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "Comfort" "Central" APART FROM THE MARK AS SHOWN.

I, Daniel Rivera, 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

Daniel Rivera

Typed or printed name of applicant

Daniel Rivera President

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

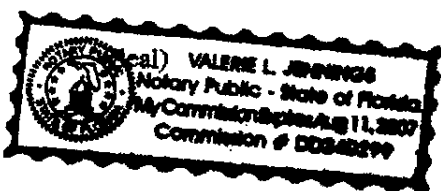
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STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

On this 14th day of December, 2004, Daniel Rivera appeared before me,

[X] who is personally known to me [] whose identity I proved on the basis of



Valerie L. Jennings Notary Public Signature Valerie L. Jennings, Notary's Printed Name

My Commission Expires: 08-11-2007

FEE: \$87.50 per class

**COMFORT
CENTRAL
INC.**

Dan Rivera
President

9420 Lazy Lane # A-12
Tampa, FL 33614
State Cert. # CACO 58737

WWW.COMFORTCENTRALINC.COM

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