

T05000000812

(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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200272545392

T05-812
Renewal

05/05/15--01020--028 **87.50 ✓

FILED
15 MAY -5 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY -5 2015

N. CAUSSEAU

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STUCCO DOCTORS

(Name of Mark Registered)

Dear Sir or Madam:

The enclosed Mark Renewal Application, specimen and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ken Stocker

(Name of Person)

Sound Venture Inc.

(Firm/Company)

P.O. Box 1153

(Address)

Ft. Walton Beach, FL 32549

(City/State and Zip Code)

For further information concerning this matter, please call:

Ken Stocker

(Name of Person)

at (850) 582-1222

(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

FILING FEE: \$87.50 per class
CERTIFICATE OF RENEWAL: \$ 8.75 (OPTIONAL)

(**NOTE:** The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:

Sound Venture Inc.

P.O. Box 1153

Ft. Walton Beach, FL 32549

Return To: Division of Corporations

P.O. Box 6327

Tallahassee, FL 32304

FILED
15 MAY -5 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1) Mark Registered: **STUCCO DOCTORS**

2) Registration Number: **T05000000812**

3) Date Filed: **6-22-2005** 4.) Renewal Date: **6-22-2015** 5.) Class(es) Filed: **SM-00370000**

6) Renewal statement pursuant to section 495.071, Florida Statutes. Below you must state the mark is still in use in Florida or state the reason for its nonuse is not due to any intention to abandon the mark.

Service mark is still in use in the state of Florida.

7) If the mark is still in use, a specimen showing actual use of the mark is included with this application.

8) If applicant is a business entity, enter the state of incorporation/formation/organization: **Florida**

Sound Venture Inc.

Typed or Printed Name of Owner

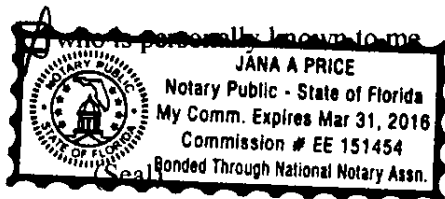
Sound Venture Inc. by Ken Stocker

Owner's Signature or Authorized Person's Signature

STATE OF **FLORIDA**

COUNTY OF **OKALOOSA**

Sworn to and subscribed before me on this **30** day of **April**, **15**, **Ken Stocker**
(Name of Individual Signing)



☒ who is personally known to me ☐ whose identity I proved on the basis of _____

Jana A Price
Notary Public's Signature

JANA A PRICE

Notary Public's Printed Name

Fee: \$87.50 Per Class

Certificate of Renewal : \$8.75 (Optional)

CR2E005 (1/11)

STUCCO DOCTORS

Florida Stucco Repair and Maintenance
Northwest East Coast
850-582-1222 386-631-7654

Florida Stucco Repair and Maintenance

Northwest 850-582-1222

East Coast 386-631-7654



- Consultation and analysis for stucco repairs and concrete restoration
- Extraction and water test to visible surface rust and moisture damage.
- Digital photos with e-mail report documentation for all stages of repair and evaluation.