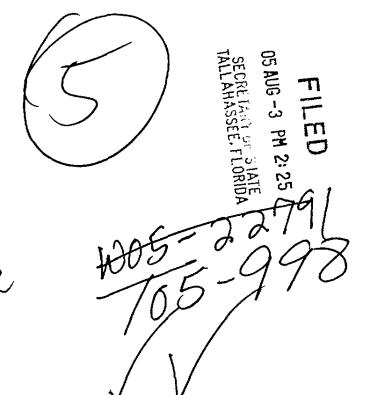


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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 5, 2005

360 COASTAL DESIGN LLC P.O. 611 ST. MARKS, FL 32355-0611

SUBJECT: 360 COASTAL DESIGN AND DESIGN OF THE NUMBERS "360" SUPERIMPOSED OVER THE GLOBE ENCIRCLED BY THE WORDS "360

COASTAL DESIGN"

Ref. Number: W05000022791

We have received your document for 360 COASTAL DESIGN AND DESIGN OF THE NUMBERS "360" SUPERIMPOSED OVER THE GLOBE ENCIRCLED BY THE WORDS "360 COASTAL DESIGN" and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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).

"CONSTRUCTION MANAGEMENT" falls under class 37.

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: "COASTAL", "DESIGN", "DESIGN OF GLOBE"

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: 805A00032187

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: CASTAL DESTAULLC)556-1902 Daytime Telephone number PART I 1. (a) Applicant's name: 360 CUASTAL DESTEN LLC (b) Applicant's business address: PO BOX 611, 99 SHELL ISLAND ROAD SATAT MANKS, FL 32355-0611 City/State/Zip (c) Applicant's telephone number: (850) 556-1902 ☐Joint Venture ☑ Other: スムと ☐ Individual Corporation ☐ Limited Partnership General Partnership Union If other than an individual, (1) Florida registration number: LOY & & & 48266 (2) Domicile State: FLORIDA (3) Federal Employer Identification Number: 06-1728546 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.) ONSTRUCTION MANAGEMENT, GREEN HOUSE PREP + ASSEMBLY, CUNSULTING ELUICES (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.) EMBROIDELED CLOTHING, PRINT ADVELTISEMENTS, BLOCHURES, STENAGE, BUSINESS CARDS

(Continued)

d) The class(es) in which goods or services fall:
47 MESCOTTANTOUS 37 CONSTRUCTION AND REPAIR
•
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: $7-19-2003$ (b) Date first used in Florida: $7-19-2003$
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.)
THE NUMBERS "360" SUPERIMPOSED OVER THE GLOBE
ENCIRCLED BY THE WORDS "360 COASTAL DESIGN"
English Translation
2. DISCLAIMER (if applicable) NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " COASTAL" "DESTEN" "DESTEN OF GLOBE" " APART FROM THE MARK AS SHOWN.
I. Ry P. Duverner. 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 Roy Rough / Mender Applicant's signadure or authorized person's signature (List name and title) COUNTY OF WAKUIA COUNTY OF WAKUIA
On this 27th day of April 205, Roy R. Duverger personally appeared before me, Who is personally known to me 1162-136-50-22-0
(Seal) Notary Public Signature Shipley Lindsey Notary's Printed Name
My Commission Expires:
FEE: \$87.50 per class



Roy Duverger

PO Box 611 St. Marks FL 32355

850-556-1902 royduverger@moose-mail.com

360 COASTAL DESIGN