

10500000/1588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

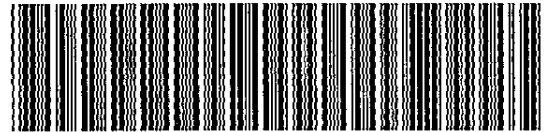
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

✓ ✓

Law Office of
JAMES M. NICHOLAS, P.A.

JAMES M. NICHOLAS
Board Certified Civil Trial Lawyer
Board Certified in Business Litigation
Certified State & Federal Mediator
Certified Arbitrator with AAA
Admitted in FL, CO, IL, & PA

1790 Highway A1A, Suite 202
Satellite Beach, FL 32937-5440
(321) 777-6339
FAX: (321) 777-6340
E-Mail: jknlegal@aol.com

December 7, 2005

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

Re: Application for the Registration of a Trademark or Service Mark
Applicant: Drive-By Exterminators, Inc.
Document Number: P04000110200

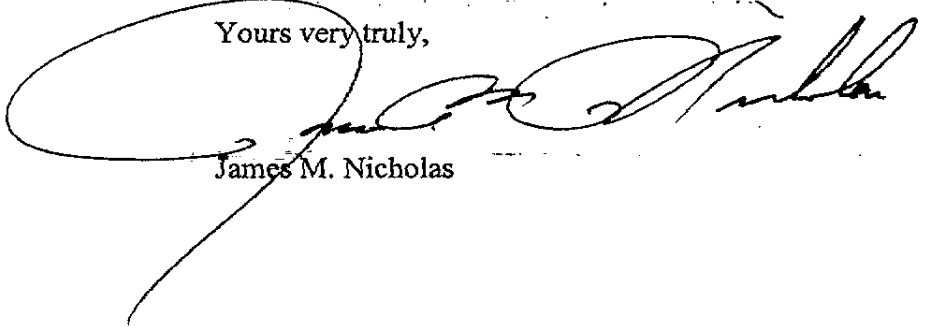
Gentlemen:

Enclosed please find the following documents:

1. Application for the Registration of a Trademark or Service Mark (one original and one copy);
2. Three (3) specimen business cards; and
3. Our firm's check in the amount of \$87.50, representing the filing fee to register said mark.

In the meantime, should you have any questions, or should you need any further documentation, please feel free to call me.

Yours very truly,



James M. Nicholas

JMN/jls
cc: Client

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:

James M. Nicholas, Esquire

James M. Nicholas, P.A.

1790 Highway A1A, Suite 202, Satellite Beach, FL 32937

(321) 777-6339
Daytime Telephone number

PART I

1. (a) Applicant's name: Drive-Bye Exterminators, Inc.

(b) Applicant's business address: 3444 Northridge Drive

Clearwater, Florida 33761

City/State/Zip

If different, Applicant's mailing address: _____

City/State/Zip

(c) Applicant's telephone number: (727) 423-9040

☐ Individual

☒ Corporation

☐ Joint Venture

☐ Other: _____

☐ General Partnership

☐ Limited Partnership

☐ Union

If other than an individual,

(1) Florida registration/document number: P04000110200 (2) Domicile State: Florida

(3) Federal Employer Identification Number: 20-1434809

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.)

Termite & Pest Control 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.)

Brochures, Business Cards, Advertisements, Contracts, Letterhead, Decals, Uniforms, Vehicle Fleet

(Continued)

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

Class 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: July 27, 2004 (b) Date first used in Florida: July 27, 2004

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 words "Drive-Bye Exterminators" above a picture of a golfer standing in a sand-trap,

hitting a termite. The words "Termite & Pest Control" and "We Drive Your Pest Away" under the picture.

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " Termite & Pest Control " APART FROM THE MARK AS SHOWN.

I, Thomas Smiddy

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

Thomas Smiddy, President

Typed or printed name of applicant

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

STATE OF Florida

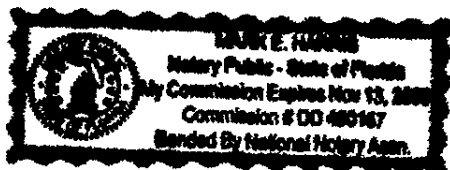
COUNTY OF Pinellas

On this 29 day of NOVEMBER, 2005, Thomas Smiddy personally appeared before me,

☐ who is personally known to me ☒ whose identity I proved on the basis of FL. DRIVERS LICENSE

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05 DEC 14 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Seal)



Mark E Harris

Notary Public Signature

MARK E. HARRIS

Notary's Printed Name

My Commission Expires: 11.13.09

FEE: \$87.50 per class

DRIVE-BYE
EXTERMINATORS



Termite & Pest Control
"We Drive Your Pest Away"

Thomas Smiddy
President
Certified Operator

3444 Northridge Drive
Clearwater, FL 33761

Ph 727-423-9040

Fax 727-772-8571

drivebyeexterminators.com