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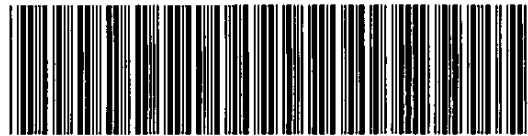
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Ponte Vedra

Plastic Surgery

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Pls make correction on
the original app & ret.
Original app not copy.



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T06-885

06/15/06--01052--010 **87.50

~~w06 27613~~

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2006

KATHERINE F. ROWE, ESQUIRE
50 NORTH LAURA STREET, SUITE 2600
JACKSONVILLE, FL 32202

SUBJECT: PONTE VEDRA PLASTIC SURGERY
Ref. Number: W06000027613

We have received your document for PONTE VEDRA PLASTIC SURGERY and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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: "PONTE VEDRA"

You have disclaimed a term or terms that do not need to be disclaimed. Please remove the following term(s) from the disclaimer statement: "PLASTIC SURGERY".

We received a copy of the application, therefore please make corrections on the original application and return the original application.

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: 206A00040970

SMITH, GAMBRELL & RUSSELL, LLP

ATLANTA OFFICE

SUITE 3100, PROMENADE II
1230 PEACHTREE STREET, N.E.
ATLANTA, GEORGIA 30309-3502
TELEPHONE
(404) 815-3500
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ATTORNEYS AT LAW
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50 NORTH LAURA STREET
JACKSONVILLE, FLORIDA 32202
TELEPHONE (904) 598-6100
FACSIMILE (904) 598-6300
WEBSITE www.sgrlaw.com

ESTABLISHED 1893

WASHINGTON, D.C. OFFICE

SUITE 800
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WASHINGTON, D.C. 20036
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(202) 263-4300
FACSIMILE
(202) 263-4329

Kathy M. Hennessey
(904) 598-6134
Direct Fax No - (904) 598-6234
E-Mail - khennessey@sgrlaw.com

July 13, 2006

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attention: Nanette Causseaux

Re: Ponte Vedra Plastic Surgery, P.A.
Letter Nos. 006A00040972 and 206A00040970

Dear Ms. Causseaux:

Pursuant to the above-referenced letters we received asking us to correct the disclaimer on two trademark applications submitted on behalf of our client, Ponte Vedra Plastic Surgery, P.A., enclosed are the original applications wherein we have revised the disclaimers from PLASTIC SURGERY to PONTE VEDRA on both applications. Pursuant to your request, we have made the corrections directly on the original applications and have included a copy of your letter with each application.

Please do not hesitate to call if you have any questions. Thank you for your assistance.

Sincerely,



Kathy M. Hennessey
Paralegal

Enclosure

cc: Brian Hobbs (w/enc.)

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:

Katharine F. Rowe, Esq.
50 North Laura Street, Suite 2600
Jacksonville, FL 32202
(904) 598-6112
Daytime Telephone number

PART I

1. (a) Applicant's name: Ponte Vedra Plastic Surgery, P.A.
- (b) Applicant's business address: 209 Ponte Vedra Park Drive
Ponte Vedra Beach, FL 32082
City/State/Zip

If different, Applicant's mailing address: _____
City/State/Zip

- (c) Applicant's telephone number: (904) 273-6200
- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Corporation | <input type="checkbox"/> Joint Venture | <input checked="" type="checkbox"/> Other: <u>Professional</u> |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Union | <u>Association</u> |

If other than an individual,

- (1) Florida registration/document number: P93000041673 (2) Domicile State: Florida
- (3) Federal Employer Identification Number: 59-3193989

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.)

Cosmetic and plastic surgery; medical consultations; medical counseling; medical services;
providing medical information, consultancy and advisory services; surgery

- (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.)
On website advertising the services, in advertising materials for the services including brochures,
signage, trade show booths, on letterhead, business cards, etc.

(Continued)

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

Class 42

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: December 31, 1993 (b) Date first used in Florida: December 31, 1993

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.)

PONTE VEDRA PLASTIC SURGERY

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " PONTE VEDRA PLASTIC SURGERY " APART FROM THE MARK AS SHOWN.

I, C. Cayce Rumsey, III, M.D., 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

Ponte Vedra Plastic Surgery, P.A.

Typed or printed name of applicant

C. Cayce Rumsey, III

Applicant's signature
(List name and title)

C. Cayce Rumsey, III, M.D.
President

STATE OF FLORIDA

COUNTY OF St Johns

On this 12th day of June, 2006, C. Cayce Rumsey, III, M.D. personally appeared before me,

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

(Seal)

Michelle M. Joyce

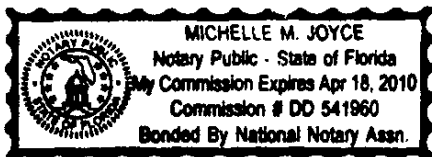
Notary Public Signature

Michelle M. Joyce

Notary's Printed Name

My Commission Expires: 4-18-10

FEE: \$87.50 per class




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TALLAHASSEE, FLORIDA

**Addendum to Application for the Registration of a Florida State Service Mark
Application for**

PONTE VEDRA PLASTIC SURGERY


Applicant submits that the PONTE VEDRA PLASTIC SURGERY service mark has become distinctive of the services through the applicant's substantially exclusive and continuous use in commerce for at least five years immediately before the date of this statement.




904.273.6200

C. Cayce Rumsey, III, M.D.
Robert W. Burk, III, M.D.
Paul J. Scioscia, M.D.
Brett J. Snyder, M.D.



Board Certified,
American Board of Plastic Surgery



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of the
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Procedures

904/273-6200

Ponte Vedra Plastic Surgery's doctors are all members of the [American Society of Plastic Surgeons](#) and [The American Society of Aesthetic Plastic Surgeons](#). For more information about any of the services listed below, please click on their name.

Plastic Surgery



surgery.org

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Patient Information Forms

For your convenience, you may download our patient information form in PDF format.
Please bring the completed forms (5 pages) with you for your first consultation.

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