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| (R | equestor's Name) | |
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| (C | ity/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | Mail Mail |
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| Certified Coples | Certificates | of Status |
| Special Instructions to | Filing Officer: | 89/ |
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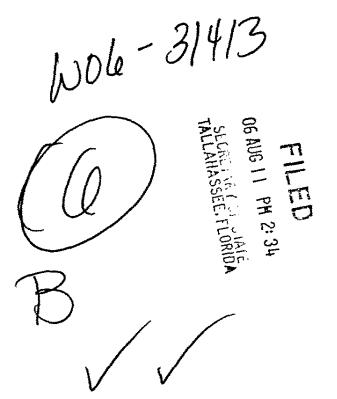
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COVER LETTER

| Division of Corporations | ** | | |
|-------------------------------------------------------|-------------------------------------------------------------|--|--|
| SUBJECT: Baker Act | | | |
| | (Mark to be registered) | | |
| The enclosed Trademark/Service Mark Application, | specimens and fee(s) are submitted for filing. | | |
| Please return all correspondence concerning this mat | ter to the following: | | |
| | <i>Y</i> | | |
| Marcia Lima Manganelli | · · · · · · · · · · · · · · · · · · · | | |
| (Name of Person) | | | |
| | | | |
| (Firm/Company) | | | |
| 40000 O | . € | | |
| 10828 Crosstie Road Wes | <u>3</u> | | |
| | _ | | |
| Jacksonville, FL 32257 | | | |
| (City/State and Zip Code) | | | |
| For further information concerning this matter, pleas | e call: | | |
| Marcia Lima Manganalli | _{st} 904 \ 483-0945 | | |
| Marcia Lima Manganelli (Name of Person) | at (904) 483-0945 (Area Code & Daytime Telephone Number) | | |
| (1,111,12,0) | (| | |
| MAILING ADDRESS: | STREET/COURIER ADDRESS: | | |
| Registration Section | Registration Section | | |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | | |
| • | Tallahassee, FL 32301 | | |



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2006

MARCIA LIMA MANGANELLI 10828 CROSSTIE ROAD WEST JACKSONVILLE, FL 32257

SUBJECT: BAKER ACT Ref. Number: W06000031413

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

You must list a more specific service in #2(a) in Part I of the application.

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

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 or HANDWRITTEN 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

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK PURSUANT TO CHAPIFE 495, FLORIDA STATUTES

| TO: Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 | ivision of Corporations ost Office Box 6327 | Name & address to whom acknowledgment should be sent: |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| | | Marcia Lima Manganelli |
| | | 10828 Crosstie Road West |
| | | Jacksonville, FL 32257 |
| | | (904) 483-0945 |
| | | Daytime Telephone number |
| | | PART I |
| 1. (a) | Applicant's name: Marcia Lima Mang | anelli |
| (b) | Applicant's business address: 10828 Cro | sstie Road West |
| | Jacksonvil | le, FL 32257 |
| | / | City/State/Zip |
| If diffe | erent, Applicant's mailing address: (same | as above) |
| | *************************************** | -City/State/Zip |
| (c) | Applicant's telephone number: (904) 4 | 83-0945 |
| | Individual | ☐Joint Venture ☐ Other: |
| | General Partnership | rship |
| | r than an individual, | |
| - , | orida registration/document number: N/A | (2) Domicile State: N/A |
| (3) Fe | deral Employer Identification Number: N/A | - |
| 2. (a) | If the mark to be registered is a service mark (i.e., furniture moving services, diaper services | , the services in connection with which the mark is used: es, house painting services, etc.) |
| Live | entertainment.; live mysic provide | led by quitars, drams, and singing, with |
| other | | 4 |
| ` | | |
| (b) | If the mark to be registered is a trademark, th (i.e., ladies sportswear, cat food, barbecue gri | e goods in connection with which the mark is used: ils, shoe laces, etc.) |
| N/A. | | • |
| <u></u> | | |
| | | |
| (c) | The mode or manner in which the mark is us | ed:(i.e., labels, decals, newspaper advertisements, brochures, etc.) |
| Merc | handise (i.e., labels, decals, stickers | , t-shirts, posters, buttons, hats, socks, beverage |
| | | newpapers, flyers, magazines, newsletters, bulletin |
| | | s, compact disks, vinyls, mp3 files, live perfomances). |
| | | (Continued) |

| d) The class(es) in which goods or services | s fall: |
|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Class 41. | |
| | |
| Date first used by the applicant, predece | PART II essor, or a related company (must include month, day and year): |
| | (b) Date first used in Florida: 01 Sep 2005 |
| (a) Date hist used any whole. | (b) Date inst used in Piorida. |
| The mark to be registered is: (If logo/de must be 25 words or less.) Baker Act | PART III esign is included, please give brief written description which |
| | |
| English Translation | |
| 2. DISCLAIMER (if applicable) | |
| NO CLAIM IS MADE TO THE EXCLUS | SIVE RIGHT TO USE THE TERM " " APART FROM THE MARK AS SHOWN. |
| the right to use such mark in Florida either in the i | , being sworn, depose and say that I am the owner and the applicant fihe owner and applicant herein, and no other person except a related company has identical form or in such near resemblance as to be likely to deceive or confuse or to wrification on my/the applicant's behalf. I further acknowledge that I have read the the facts stated herein are true and correct |
| Marci | ia Lima Manganelli 💢 👵 🙃 |
| | Typed or printed name of applicant |
| Milion | Hand to The South of the South |
| 70 | Applicant's signature (List name and title) |
| STATE OF Florida | — " 3 3 3 3 1 |
| COUNTY OF <u>DUVAL</u> | |
| On this <u>9</u> day of <u>July</u> appeared before me, | , 2006, Marcia Lima Mangaret personally |
| | whose identity I proved on the basis of FL Drivers Licesc |
| | |
| | Mest 12 |
| | Notary Public Signature |
| (Seal) | Marion A Ronal |
| MATTHEW A. BROWN | Notary's Printed Name |
| Notary Public, State of Florida | My Commission Expires: Nov. 70, 2009 |
| My comm. exp. Nov. 20, 2009 Comm. No. DD 492323 | FEE: \$87.50 per class |

FEE: \$87.50 per class



Bakez Act

Friday, July 28 at

Kickbacks @9pm

910 King St. 388-9551

myspace.com/wearebakeract