70600000/597

. (Re	equestor's Name)	,
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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TALLAHASSEE.FLORIDA

Assignment - 1597

COSTELLO & ROYSTON, LLP

ATTORNEYS AT LAW A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS Voice (239) 939-2222 • Facsimile (239) 939-2280

Truman J. Costello, P.A. Board Certified Wills, Trusts and Estates Lawyer

Robert D. Royston, Jr., P.A.

Brittany Professional Centre 12670 New Brittany Blvd., Suite 101 Fort Myers, FL 33907

> **Mailing Address** Post Office Drawer 60205 Fort Myers, FL 33906-6205

December 18, 2006

Florida Department of State **Division of Corporations** Registration Section P.O. Box 6327 Tallahassee, FL 32314

Sent By: Regular U.S Mail

Re: Joediveramerica and Design of Male Face with Scuba Mask

Dear Sir or Madam:

Enclosed please find the following documents for the above referenced matter:

- 1. Assignment of Mark Registration Joediveramerica and Design of Male Face with Scuba Mask, Registration Number: T06000001597.
- 2. Assignment of Mark Registration Design of Male Face with Scuba Mask, Registration Number: T06000001596.
- 3. Assignment of Mark Registration Joediveramerica, Registration Number: T06000001598
- 4. My trust check in the amount of \$150.00 representing the filing fee for each.

Please call if you have any questions regarding this matter.

E-mail:

Direct Dial: (239) 939-2222 ext. 205 rroyston@csrlaw.com

Enclosures:

as stated above

RDR/klr



COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: JOEDIVERAMERICA AND DESIGN OF MALE FACE WITH SCUBA MASK (Name of Mark to be Assigned)

Dear Sir or Madam:

The enclosed Mark Assignment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert D. Royston, Jr., Esq.
(Name of Person)
Costello & Royston, LLP
(Firm/Company)
P.O. Drawer 60205
(Address)
Fort Myers, FL 33906-6205
(City/State and Zip Code)
For further information concerning this matter, please call:

STREET/COURIER ADDRESS:

(Name of Person)

Robert D. Royston, Jr., Esq.

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

) 939-2222 x 205

(Area Code & Daytime Telephone Number)

_{at (} 239

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

ASSIGNMENT OF MARK REGISTRATION

1. The mark to be	assigned is: JOEDIVERA	AMERICA AND DESIGN OF MALE FACE WI	TH SCUBA MASI
Registration Numbe	r: <u>T06000001597</u>		
2. ASSIGNOR: Name:	MEK, INC.		
If Assignor is a corp	oration, the state in which	incorporated & FL registration/document number:	
P01000002087			06 TAI
Address: 12801-1	7 CommonwealthDrive	е	SECONO TO
City: Fort Myers	State/	/Zip: FL 33913	22 HASS
3. ASSIGNEE: Name:	J. DIVER, INC.		PH 1: 30
If Assignee is a corp	oration, the state in which	incorporated & FL registration/document number:	30 ATE
P06000148812			\triangleright
Address: 2011 SE 1	3th Street		
City: Cape Coral		_State/Zip_FL 33990	
which the mark is		rk, together with the good will of the business in ood will of the business connected with the use of C., a Florida corporation	to
	-yg	(the Assignor)	to
J. DIVER, INC.,	a Florida corporation		
	(the Assignee)	1	
Mulicol (As	signer's Signature)	(Assignee's Signature)	ing_
By Michael E. Korz (Typed or Printed Nat	ep, President ne of Person Signing Above)	By Jason Williams, Preside (Typed or Printed Name of Person	
	of December	, 2006 , Michael E. Korzep & Jason Willia	ms
personally appeared who is personall	<u></u>	nose identity I proved on the basis of \mathcal{H} . Due	es Lun
	Mary V. Palumbo MISSION # DD199774 CURR	Autho	
MILITAN BONDE	THRU TROY 2007	Signature of Notary Public	

Instructions: The assignment must be signed by both the assignee and the assignor. If a corporation, an officer of the corporation must sign. Both the assignee's and the assignor's signature must be acknowledged before a Notary Public. If you need assistance, call the Registration Section at (850) 245-6051.