

T0700000/351

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(Address)

(City/State/Zip/Phone #)

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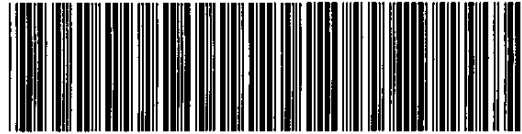
Special Instructions to Filing Officer:

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In lieu of ret
your doc's we will
make the corrections

in Part I (a) at your
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FILED
07 OCT -2 AM 8:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

~~4007-46360~~
T07-1351

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 100%
(Mark to be registered)

The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nichole L. Fisher
(Name of Person)

100 Percent, Inc
(Firm/Company)

P.O. Box 1173
(Address)

Ocoee, FL 34761
(City/State and Zip Code)

For further information concerning this matter, please call:

Nichole L Fisher at (904) 514-9238
(Name of Person) (Area Code & Daytime Telephone Number)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(NOTE: The information contained in this cover letter will be included in the permanent record and will be available to the general public.)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2007

NICHOLE L. FISHER
100% INC.
P.O. BOX 1173
OCOE, FL 34761

SUBJECT: 100%, COMMITTED, FAVORED, DETERMINED AND CHOSEN
Ref. Number: W07000046360

We have received your document for 100%, COMMITTED, FAVORED, DETERMINED AND CHOSEN and your check(s) totaling \$447.50. However, the document has not been filed and is being retained in this office for the following:

#1(a) of Part I must contain the name of the owner as identified in the records of the Florida Department of State. Please refer to enclosed computer printout and amend the name accordingly.

In lieu of returning your document's, we will make the corrections in Part I 1(a) per your written request.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 207A00055206

Please correct the name of owner
as 100 Percent, Inc.

Thanks.
Debora Bradley

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

PART I

1. (a) Applicant's name: 100 Percent, Inc.

(b) Applicant's business address: 10846 Natalie Drive
Jacksonville, FL 32218
City/State/Zip

If different, Applicant's mailing address: P.O. Box 1173
Deer, FL 34761
City/State/Zip

(c) Applicant's telephone number: (904) 514-8238
☐ Individual ☒ Corporation ☐ Joint Venture ☐ Limited Liability Company
☐ General Partnership ☐ Limited Partnership ☐ Union ☐ Other:

If other than an individual,

(1) Florida registration/document number: P07000065315 (2) Domicile State: Florida

(3) Federal Employer Identification Number: 71-1002382

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.)

N/A

(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.)

T-Shirts, women clothing

(c) The specific way the mark is applied to the good(s) or used in advertising: (i.e., labels, decals, newspaper advertisements, brochures, etc.)

Imprinted

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

Class 25

(Continued)

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: 4-19-06 (b) Date first used in Florida: 4-19-06

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.)

100%

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0700T-2 AM 8:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA

English Translation 100%

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "100%" APART FROM THE MARK AS SHOWN.

I, Nichole L. Fisher, 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 to the best of my knowledge no other person except a related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, to cause mistake or to deceive. 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.

Nichole L. Fisher

Typed or printed name of applicant

Nichole L. Fisher, President

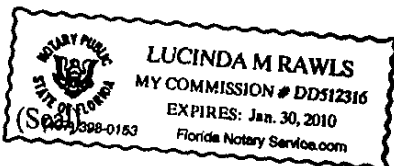
Applicant's signature
(List name and title)

STATE OF Florida

COUNTY OF Duval

On this 14 day of September 2007 Nichole L. Fisher personally appeared before me,

☐ who is personally known to me ☒ whose identity I proved on the basis of Driver's license



Lucinda M. Rawls
Notary Public Signature
Lucinda M. Rawls
Notary's Printed Name

My Commission Expires: Jan 30, 2010

FILING FEE: \$87.50 per class