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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

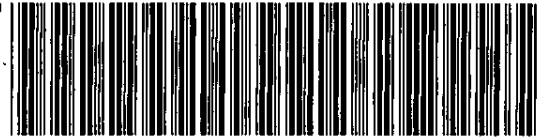
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 FEB 11 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. CAUSSEAUX

FEB 13 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOT MAIDS

(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:

LINDA WELLS

(Name of Person)

MAID CONNECTION, LLC

(Firm/Company)

13542 N. FLORIDA AVE, SUITE 208

(Address)

TAMPA, FL 33613

(City/State and Zip Code)

For further information concerning this matter, please call:

LINDA WELLS

(Name of Person)

at (813) 774 9767

(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.)

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: MAID CONNECTION, LLC
(b) Applicant's business address: 13542 N. FLORIDA AVE, SUITE 208
TAMPA, FL 33613
City/State/Zip

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

- (c) Applicant's telephone number: (813) 774 9767
 Individual Corporation Joint Venture Limited Liability Company
 General Partnership Limited Partnership Union Other: _____

If other than an individual,

- (1) Florida registration/document number: L05000068377 ✓ (2) Domicile State: FLORIDA
(3) Federal Employer Identification Number: 203134981

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.)

MAID SERVICE

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

BROCHURES, ADVERTISEMENTS, SIGNS, WEB SITE BANNERS, BUSINESS CARDS

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

CLASS 37

(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: SEPT. 8, 2006 (b) Date first used in Florida: SEPT 8, 2006

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.)

GOT MAIDS

English Translation _____

2. DISCLAIMER (if applicable)

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

LINDA WELLS

I, LINDA WELLS, 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.

LINDA WELLS

Typed or printed name of applicant

[Signature]

Applicant's signature
(List name and title)

FILED
9 FEB 11 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF Florida

COUNTY OF Hillborough

On this 4th day of February, 2008, Linda J. Wells personally appeared before me.

who is personally known to me whose identity I proved on the basis of _____

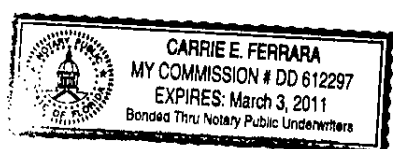
(Seal)

Carrie E. Ferrara
Notary Public Signature

Carrie E. Ferrara
Notary's Printed Name

My Commission Expires: March 3, 2011

FILING FEE: \$87.50 per class



1-866-GOT-MAIDS?
www.1866gotmaids.com

Got MAIDS?

AFFORDABLE HOUSECLEANING

(813) 774-9767

(727) 230-3096

MAID CONNECTION

STREET SIGNS