

T09000000325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

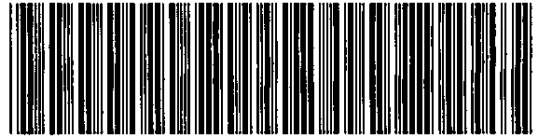
(Business Entity Name)

(Document Number)

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Renewal

03/17/14--01009--011 **87.50

T09-325

FILED
14 MAR 31 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR -2 2014

N. CAUSSEAU

COVER LETTER

TO: ~~Registration~~ Section
Division of Corporations

SUBJECT: WHISKEY JOE'S
(Name of Mark Registered)

Dear Sir or Madam:

The enclosed Mark Renewal Application, specimen and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lynn Kellum

(Name of Person)

Specialty Restaurants Corporation

(Firm/Company)

8191 E. Kaiser Blvd.

(Address)

Anaheim, CA 92808

(City/State and Zip Code)

For further information concerning this matter, please call:

Lynn Kellum at (714) 279- 6135
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

FILING FEE: \$87.50 per class
CERTIFICATE OF RENEWAL: \$ 8.75 (OPTIONAL)

(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

March 18, 2014

LYNN KELLUM
SPECIALTY RESTAURANTS CORPORATION
8191 EAST KAISER BLVD.
ANAHEIM, CA 92808

SUBJECT: WHISKY JOE'S AND DESIGN OF THE WORDS WHISKY WITH A
SLIGHT CURVE AND JOE'S BELOW WHISKY
Ref. Number: T09000000325

We have received your document for WHISKY JOE'S AND DESIGN OF THE WORDS WHISKY WITH A SLIGHT CURVE AND JOE'S BELOW WHISKY and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Section 495.071(4), F.S., which became effective January 1, 2007, requires all renewal applications to include a specimen (sample) showing the actual use of the mark on or in connection with the goods or services.

If the mark is a trademark registered under classes 1-34, submit one of the following: a label, tag, decal, container, box, wrapper, etc.

If the mark is a service mark registered under classes 35-45, submit one of the following: a newspaper advertisement, brochure, flyer, business card, etc.

For bulky specimens, we will accept a legible photograph clearly showing the mark as well as the good(s) and/or service(s) the mark is being used in connection with.

NOTE: Only one specimen is required. The name and/or design shown on the specimen must be identical to the name and/or design registered with our office. We DO NOT accept letterhead or stationery.

Please attach your specimens to a copy of this letter or to your corrected application, if it was returned to you for correction(s), and return it/them to this office for processing.

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

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:

Specialty Restaurants Corp.

8191 E. Kaiser Blvd.

Anaheim CA 92808

Return To: Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

FILED
14 MAR 31 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- 1) Mark Registered: WHISKEY JOE'S
- 2) Registration Number: T09000000325
- 3) Date Filed: 3-31-09 4.) Renewal Date: 3-31-14 5.) Class(es) Filed: 43

- 6) Renewal statement pursuant to section 495.071, Florida Statutes. Below you must state the mark is still in use in Florida or state the reason for its nonuse is not due to any intention to abandon the mark.
- Mark is still in use in Florida

- 7) If the mark is still in use, a specimen showing actual use of the mark is included with this application.
- 8) If applicant is a business entity, enter the state of incorporation/formation/organization: Florida

Specialty Restaurants Corporation

Typed or Printed Name of Owner

Cecilia Tallichet

Owner's Signature or Authorized Person's Signature

STATE OF California

COUNTY OF Orange

Sworn to and subscribed before me on this 13th day of March, 2014, CECILIA TALLICHET
(Name of Individual Signing)

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

(Seal)

Lynette M. Kellum

Notary Public's Signature

LYNETTE M. KELLUM

Notary Public's Printed Name

Fee: \$87.50 Per Class

Certificate of Renewal : \$8.75 (Optional)

CR2E005 (1/11)

OFFICIAL SPECIMEN
TM/SM REG.#



WWW.WHISKEYJOESTAMPA.COM

WE APPRECIATE YOUR COMMENTS

YOU VISITED WHISKEY JOE'S FOR ... (CIRCLE ONE)
LUNCH. DINNER. HAPPY HOUR. ENTERTAINMENT. BRUNCH

HOW MANY TIMES HAVE YOU VISITED US?
(CIRCLE ONE)

FIRST TIME. 2-5. 6-10. 11-20. I STOPPED COUNTING

WAS YOUR SERVER FRIENDLY & HELPFUL?
YES - MAYBE - NOT SURE - NO

HOW WOULD YOU RATE YOUR FOOD QUALITY
COMPARED TO YOUR EXPECTATIONS?
MUCH BETTER - BETTER - ABOUT THE SAME - NOT GOOD

HOW WOULD YOU RATE THE ATMOSPHERE
COMPARED TO YOUR EXPECTATIONS?
LOVED IT 4 3 2 1 DIDN'T LIKE IT

HOW DID YOU HEAR ABOUT US?
NEWSPAPER - DRIVE BY - FRIEND - RADIO - OTHER

Did a manager visit your table? YES / NO

Would you recommend us to a friend? YES / NO

I would return to Whiskey Joe's more often if ... _____

Please drop this card into *the* mailbox at the retail store in the lobby

7720 W. COURTNEY CAMPBELL CAUSEWAY
TAMPA, FL 33607
813.281.0770

Specialty Restaurants Corporation will use your e-mail address to send you reservation confirmations, news or special offers from Specialty Restaurants Corporation only.