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COVER LETTER

Division of Corporations		
SUBJECT: RALLYE		
(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:		
William G. Giltinan		
(Name of Person)		
Carlton Fields, PA		
(Firm/Company)		
P.O. Box 3239		
(Address)		
Tampa, FL 33601		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
William G. Giltinan at (813) 223-7000 (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		

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.)

Tallahassee, Florida 32314

CR2E005 (1/11)

2661 Executive Center Circle Tallahassee, Florida 32301

TO:

Registration Section

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:	Return To: Division of Corporations
Amalie AOC, Ltd.	P.O. Box 6327 Tallahassee, FL 32314
1601 McCloskey Boulevard	10g 16.
Tampa, FL 33605	1000000000000000000000000000000000000
1) Mark Registered: RALLYE	SS F T
2) Registration Number: T0900000	746
	val Date: 07/16/2019 5.) Class(es) Filed: 04
6) Renewal statement pursuant to section 49 use in Florida or state the reason for its no The mark is still in use	5.071. Florida Statues. Below you must state the mark is still in onuse is not due to any intention to abandon the mark. in Florida
7) If the mark is still in use, a specimen show	wing 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
	Amalie AOC, Ltd.
	Typed or Printed Name of Owner
STATE OF Florida	Owner's Signature or Authorized Person's Signature
COUNTY OF Hillsborough	
Sworn to and subscribed before me on this 29	may of Armu. 2019. Harry J. Barkett (Name of Individual Signing)
who is personally known to me whose	identity I proved on the basis of
	Rachel Poole
(Seal)	Notary Public's Signature
Fee: \$87.50 Per Class	RACHEL PONE
Certificate of Renewal: \$8.75 (Optional)	Notary Public's Printed Name



