## 110000000594

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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JUN 23 2014 N. CAUSSEAUX

## COVER LETTER \_\_

**Registration Section** TO: Division of Corporations

## SUBJECT: Spark! and design of the word Spark

(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:

Lynne Shelton

Shelton & Power, LLC

(Firm/Company)

771 Oak Avenue Parkway, Suite 3

Folsom, CA 95630

(City/State and Zip Code)

For further information concerning this matter, please call:

Lynne Shelton Eqs.

 $at \, (\frac{512}{(\text{Area Code \& Daytime Telephone Number})}$ 

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: \$50 per class

## ASSIGNMENT OF MARK REGISTRATION

1.	The mark to be assigned is: Spark!	and the design of the	ne word "Spark"	
2.	Registration Number:	594		
3.	(a) Assignor's name: Spark! Enr	chment Center, LLC	<u> </u>	
	(b) Assignor's Business Address:	5965 Red Bug Lake	e Road, #221	
		Winter Springs,	FI 32708	
		City/State/		
			VITALIAN TO A TO	
	If Different, Assignor's Mailing Address	:	6 <b>0</b> (	
		City/State/		
4.	(a) Assignee's name: Spark! Ma	akers, LLC	PA O	
	(b) Assignee's Business Address:	5965 Red Bug Lake	e Road, #221	
		Winter Springs	FL 32708	
Winter Springs, FL 32708 City/State/Zip				
	If Different, Assignee's Mailing Address			
	Ti Directon, rissignee a maning riadiosa			
	407	City/State/	/Zip	
	(c) Assignee's telephone number: (407)	0	Limited Liability Company	
	General Partnership Limited Pa	rtnership	Other:	
		/		
Ιſ	other than an individual,			
11	(1) Florida registration/ document number	er: <u>L14000073538</u> (2) I	Domicile State: FL	
	other than an individual,  (1) Florida registration/ document number  (3) Federal Employer Identification Num	ber: 46-5610396		

ssigned by Spark! Enrichment Center, LLC	ւ <sub>օ</sub> Spark!I	Makers,	LLC
(the Assignor)		(the Assi	
. Assignor's Signature:	2		
By Marybeth Deleonardis	_		
(Typed or Printed Name of Person Signing Above)			
Sworn to and subscribed before me on this day of	June	24/4	Spyleth Deleon (Name of Individual Signing)
who is personally known to me whose identity	I proved on the	basis of	
(Notary Seal)  LIAN MONTANEZ-ASBERRY  lotary Public, State of Florida  y Comm. Expires May 6, 2017  No. FF 15011  Signature of 1	Votary Public	· ·	
7. Assignee's Signature:	W/L		
By Stephen Deleonardis (Typed or Printed Name of Person Signing Above	)	٠	· A *
Sworn to and subscribed before me on this 94 day of 1	Ture	, <u>1904, St</u>	lephon Deleonardis (Name of Individual Signing)
who is personally known to me under whose identity I	proved on the bas	sis of	
(Notary Seal)		•	
Notary Public, State of Florida My Comm. Expires May 6, 2017 No. FF 15011	Molary Public		
FILING FEI Division of Corporations P. O.	E: \$50 per class Box 6327 Talla	hassee, FL 3	2314 🛮 🗸 🛨
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