

T11000000804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_  
2 pages

Special Instructions to Filing Officer:

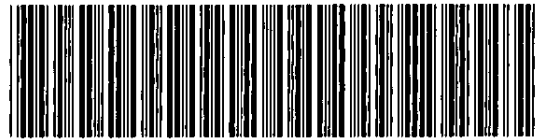
789/304/754/747/  
45

The applicant/owner  
should be the "State  
Agency."

6392

740/762/6260

Florida,  
Certified,  
Fire fighter  
Des of Florida



800209532638

T11-804

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 AUG 15 AM 10:10

FILED

Ralph Crawford  
called 8/19/11  
OK to make corre. in Part III  
up

N. CAUSSEAU

AUG 19 2011

EXAMINER

Florida Department of Agriculture and Consumer Services - Bureau of Finance & Accounting

Transaction Type:

TR 51 - Unencumbered Disbursement  
TR 52 - Revolving Fund Disbursement  
TR 58 - Disbursement Correction  
TR 70 - Encumbered Disbursement

Special Category 40000

Batch Num 410435

Description TRADEMARK

Prepared By: PALMIOB

Disb Trans Type 51

Status: PENDING

Phone# 850 9216389

Voucher#

EN-NO

Payable#

Suncom

| Line No<br>(TR 70<br>Only)<br>(4) | Organization<br>Code<br>(11) | EO<br>(2) | Object<br>Code<br>(6) | Sub Vend<br>ID<br>(9) | Amount   | Vendor<br>Identification<br>(19) | Seq.<br>No.<br>(3) | Trans Date<br>mmddyyyy<br>(8) | Invoice<br>(9) |
|-----------------------------------|------------------------------|-----------|-----------------------|-----------------------|----------|----------------------------------|--------------------|-------------------------------|----------------|
|                                   | 42110501001                  | F1        | 399000                |                       | \$ 87.50 |                                  |                    | 08042011                      | 1              |
|                                   | 42110501001                  | F1        | 399000                |                       | \$ 87.50 |                                  |                    | 08042011                      | 2              |
|                                   | 42110501001                  | F1        | 399000                |                       | \$ 87.50 |                                  |                    | 08042011                      | 3              |

Other  
Doc #

PID

Total Amount:

262.50

Total Items: 3

Journal transfer info  
was provided to us  
by ms. Manning

451010601324530010000

cat 000100

Direct 001000

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Florida Certified Wildland Firefighter Cooperator  
(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:

Ralph F. Crawford  
(Name of Person)

Florida Forest service  
(Firm/Company)

3125 Conner Boulevard, Room 158  
(Address)

Tallahassee, Florida 32399-1650  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ralph F. Crawford at ( 850 ) 487-0648  
(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

August 9, 2011

RALPH CRAWFORD, ASST. CHIEF (PAGE ONE OF TWO)  
DACS-FLORIDA FOREST SERVICE  
3125 CONNER BLVD., SUITE A  
TALLAHASSEE, FL 32399-1650

We have received your document for DESIGN OF BLACK CIRCLE WITH BRIGHT GREEN BORDER, RED CIRCULAR TEXT "FLORIDA COOPERATOR" SURROUNDING YELLOW CIRCLE WITH BLACK CIRCULAR TEXT "CERTIFIED WILDLAND FIREFIGHTER" SURROUNDING SHAPE OF and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

FURTHER INSTRUCTIONS CONTINUED ON PAGE TWO.

In Part I(2)(a) or (b) you must state the goods or services the mark is used in connection with. If the mark is a trademark, you must specify the specific goods or products. If the mark is a service mark, you must specify the exact services you are providing.

Class(es) "45" would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) "45".

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: "FLORIDA" "CERTIFIED" "FIRE FIGHTER" "DESIGN OF FLORIDA"

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: 911A00018681



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 9, 2011

RALPH CRAWFORD, ASST. CHIEF (PAGE TWO OF TWO)  
DACS-FLORIDA FOREST SERVICE  
3125 CONNER BLVD., SUITE A  
TALLAHASSEE, FL 32399-1650

We have received your document for DESIGN OF BLACK CIRCLE WITH BRIGHT GREEN BORDER, RED CIRCULAR TEXT "FLORIDA COOPERATOR" SURROUNDING YELLOW CIRCLE WITH BLACK CIRCULAR TEXT "CERTIFIED WILDLAND FIREFIGHTER" SURROUNDING SHAPE OF and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Part I 1.(a) APPLICANT/OWNER, the name of the applicant should be the "STATE AGENCY" who will own the mark.

Because of space limitations, our computer system will not allow our office to list the detailed description you have provided in part III. Please amend part III to reflect a more basic description of 25 words or less. Note: If the detailed description is not revised, this office will update our computer system with a more basic description of the mark. The detailed description you provided will remain listed in part III of the application and will be available to the public via our website [www.sunbiz.org](http://www.sunbiz.org).

The specimens provided this office are not acceptable; we need three permanent specimens, **which may be the same or different**. We do not accept camera ready copies. We do not accept specimens which have been altered or defaced in any manner. In order to register your service mark, we need specimens from which we can determine the services being rendered. We will accept brochures, newspaper, or magazine advertisements, or business cards. If business cards are used, we must be able to determine from the business card the services offered. The mere mark, address, city, etc., on the business card, brochure, or advertisement is not acceptable -- we must be able to look at the specimens provided and be able to determine the services being rendered. We need specimens for each class of registration. We DO NOT accept letterhead, stationery, envelopes, invoices or mailing labels.

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 18, 2011

RALPH CRAWFORD, ASST. CHIEF  
DACS-FLORIDA FOREST SERVICE  
3125 CONNER BLVD., SUITE A  
TALLAHASSEE, FL 32399-1650

SUBJECT: DESIGN OF BLACK CIRCLE WITH BRIGHT GREEN BORDER,  
RED CIRCULAR TEXT "FLORIDA COOPERATOR" SURROUNDING YELLOW  
CIRCLE WITH BLACK CIRCULAR TEXT "CERTIFIED WILDLAND  
COOPERATOR" SURROUNDING SHAPE OF  
Ref. Number: W11000041559

We have received your document for DESIGN OF BLACK CIRCLE WITH  
BRIGHT GREEN BORDER, RED CIRCULAR TEXT "FLORIDA COOPERATOR"  
SURROUNDING YELLOW CIRCLE WITH BLACK CIRCULAR TEXT  
"CERTIFIED WILDLAND COOPERATOR" SURROUNDING SHAPE OF and  
your check(s) totaling \$87.50. However, the document has not been filed and is  
being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

The specimens you have submitted are not acceptable. The name and/or design  
on your specimens are/is not identical to the name and/or design you have listed  
in Part III of the application. Please submit three specimens that are identical to  
the name and/or design you listed in Part III.

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: 911A00019228

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK  
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

FILED  
11 AUG 15 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TO: Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

PART I

1. OWNER/APPLICANT: Enter the name and address of the individual or the business entity to be listed as the owner of the Trademark and/or Service Mark on the records of the Florida Department of State.

(a) Owner's/Applicant's name: Department of Agriculture & Consumer Services / Florida Forest Service

(b) Owner's/Applicant's business address: 3125 Conner Boulevard, Room 157  
Tallahassee, Florida 32399-1650

City/State/Zip

If different, Owner's/Applicant's mailing address: \_\_\_\_\_

City/State/Zip

(c) Owner's/Applicant's telephone number: 850 488-6111

Check the appropriate box to indicate the Owner/Applicant is a(n):

☐ Individual

☐ Corporation

☐ Joint Venture

☐ Limited Liability Company

☐ General Partnership ☐ Limited Partnership

☐ Union

☒ Other: State Agency

If the Owner/Applicant is a business entity, the business entity must have an active filing or registration on file with the Florida Department of State. If the Owner/Applicant is not an individual, enter the business entity's Florida registration/document number in #1, the state or country under the laws of which the business entity is currently formed, organized or incorporated under in #2, and the entity's federal employer identification number (EIN) in #3.

(1) Florida registration/document number: \_\_\_\_\_

(2) Domicile State or Country: Florida

(3) Federal Employer Identification Number: 59-2883965

2. (a) **SERVICE MARK:** If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with a type of service, the mark is a service mark. If the mark is a service mark, the applicant/owner must list the specific service(s) the mark is being used in connection with. For example: furniture moving services, diaper services, house painting services, wholesale and retail sales of tractor equipment, etc. If the owner/applicant is using the mark to identify services available in the market place, enter the specific service(s) being rendered here:

(Note: List only those services currently being rendered by the owner/applicant. Do not include future services.)

The service mark identifies the wearer as having completed the Florida Forest Service  
Basic Fire Control Training class and is certified and qualified to assist the Florida Forest Service in  
suppressing wildfires as per F.S. 590.02(2)

2. (b) TRADEMARK: If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with an actual product manufactured by the owner/applicant or on the owner/applicant's behalf, the mark is a trademark. If the mark is a trademark, the applicant/owner must list the specific product(s) the name, logo, design and/or slogan is being used to identify. For example: ladies sportswear, cat food, barbecue grills, shoe laces, etc. If the owner/applicant is using the name, logo, design and/or slogan to identify goods available in the market place, enter the specific product(s) the name, logo, design and/or slogan is being used to identify:

(Note: List only those product(s) currently available. Do not include future products.)

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2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY USED:

SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connection with a type of service, you must specify the form(s)/mean(s) of advertisement the applicant/owner is using to advertise the services to the general public. For example: newspaper advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a type of service, state how the name, logo, design and/or slogan are/is being used in advertising here:

The mark is used as a patch on Florida Forest Service cooperators that have completed the Florida Forest Service Basic Fire Control training fire fighter class.

TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a product manufactured by or for the applicant/owner, you must specify how the mark is applied or affixed to the actual product or its packaging. For example: a tag, label, imprinted or engraved on the actual product, etc. If the mark is being used in connection with a specific product, state how the name, logo, design and/or slogan is applied or affixed to the actual product(s) or the packaging:

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2. (d) FEE(S) AND CLASS(ES): There are a total of 45 classes or categories in which all products or services must be categorized. The fee to register a mark is \$87.50 per class. Make check payable to Florida Department of State.

List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and/or 2(b) above:

45

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## PART II

1. You must state the date the name, logo, design and/or slogan was first used in the state of Florida, and, if it was used in another state or country, the date you first used the name, logo, design and/or slogan in the other state or country. Enter the month, day, and year the name, logo, design and/or slogan was first used by the applicant/owner, the predecessor, or a related company in Florida. If the name, logo, design and/or slogan has been used in another state or country, then you must also enter the month, day, and year the name, logo, design and/or slogan was/were used in another state or country, when applicable.

**Note: The Florida Statutes require a mark to be in use prior to registration.**

(a) Date first used in other state or country, if applicable: \_\_\_\_\_

(b) Date first used in Florida: July 1, 2005

## PART III

### **ENTER NAME, LOGO, DESIGN AND/OR SLOGAN BEING REGISTERED:**

1. Enter the name, a brief description of the logo or design, and/or the slogan you are registering. The description of the logo and/or design must be 25 words or less. List the exact name, slogan, and/or description of the logo/design here: (NOTE: The name, logo, design and/or slogan listed in this section must match the exact name, logo, design and/or slogan listed on your specimens or examples.)

Black circle with green border and red circular text of "Florida Cooperator" surrounding a  
yellow circle with black circular text "Certified Wildland ~~Fire~~fighter" the shape of Florida  
and two pine trees with flames at their base.

Provide the English translation of any and all terms listed #1 above, when applicable: \_\_\_\_\_

### 2. DISCLAIMER STATEMENT (if applicable):

Your mark may include a word or design that is commonly used by others. Commonly used terms or designs must be disclaimed. When you disclaim a specific term or design, you are acknowledging this term is commonly used by others and that you do not claim the exclusive right to use the disclaimed term or design. All geographical terms and representations of cities, states or countries must be disclaimed (i.e., Miami, Orlando, Florida, the design of the state of Florida, the design of the United States of America, etc.). Corporate suffixes and terms readily associated with the specific product(s) and/or(s) service being provided must also be disclaimed.

Enter all terms listed in #1 above which require a disclaimer in the space provided below:

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM(S) "Florida", "Firefighter", "Cooperator"  
"Certified" "Design of Florida" "APART FROM THE MARK AS SHOWN.

3. ATTACH OR INCLUDE THREE SPECIMENS OR EXAMPLES OF THE TRADEMARK OR SERVICE MARK BEING REGISTERED

Chapter 495, F.S., requires you to submit three specimens (samples or examples) of the mark in use. You must submit three specimens FOR EACH CLASS listed in Part I #2(d). The name, logo, design and/or slogan on the specimens must be identical to the name, logo, design and/or slogan being registered. You may provide three identical specimens or three different specimens. For each service mark class (classes 35-45), you may provide three newspaper advertisements, business cards, brochures, flyers, or any combination thereof. For each trademark class (classes 1-34), you may provide three tags, labels, boxes, etc. or any combination thereof. Photographs of bulky specimens are acceptable if the mark being registered and the good(s) or product(s) are clearly legible.

SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:

I, Ralph Crawford, 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.

RALPH F. CRAWFORD

Typed or printed name of applicant

Ralph F. Crawford  
Applicant's signature  
(List name and title)

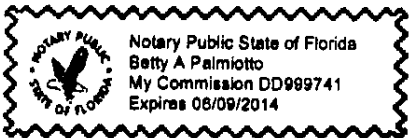
STATE OF Florida

COUNTY OF Leon

Sworn to and subscribed before me on this 28 day of July, 2011, Ralph Crawford  
(Name of Individual Signing)

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

(Seal)



Betty A. Palmiotto  
Notary Public Signature

Betty A. Palmiotto  
Notary's Printed Name

My Commission Expires: 6/9/2014

FILING FEE: \$87.50 per class

FILED  
11 AUG 15 AM 10 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OFFICIAL SPECIMEN

TM/SM REG. #

111000000804

