T11229

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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Renewal

06/02/14--01027--005 **87.50

771229



JUN -3 2014 N. CAUSSEAUX

COVER LETTER .

TÓ. Registration Section
Division of Corporations

SUBJECT: THE PERFECT PACKAGE

(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 M. Hobby, III

(Name of Person)

Attorney at Law

(Firm/Company)

157 E. New England Avenue, #375

(Address)

Winter Park, FL 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

William M. Hobby

. ,407

644-8888

(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.)

CR2E005 (1/11)

MARK RENEWAL APPLICATION

Bood (County County State	Return To: Division of Corporations
Board of County Commissioners, Orange County, Florida	P.O. Box 6327 Tallahassee, FL 32314
P.O. Box 691509	
Orlando, FL 32869	7 7
THE DEDE	OT DACKAGE
1) Mark Registered: THE PERFE	CI PACKAGE
2) Registration Number: T11229	NO P
3) Date Filed: 06/12/1989 4.) Renew	al Date: 06/12/2014 5.) Class(es) Filed: 0035
· · · · · · · · · · · · · · · · · · ·	5.071, Florida Statues. Below you must state the mark is still in nuse is not due to any intention to abandon the mark. in the State of Florida
7) If the mark is still in use, a specimen show	ving actual use of the mark is included with this application.
8) If applicant is a business entity, enter the s	Board of County Commissioners, orange County SHOEMAKS Typed or Printed Name of Owner
8) If applicant is a business entity, enter the s STATE OF Florida	Board of County Commissioners, orange County, SHUEMAKN
STATE OF Florida	Board of County Commissioners, orange County, SHOEMAKS Typed or Printed Name of Owner Owner's Signature or Authorized Person's Signature
STATE OF Florida	Board of County Commissioners, orange County SHOEMAKS Typed or Printed Name of Owner



The following equipment, services and personnel are included within Rate Schedules II and III at no additional charge:

Exhibition Halls:

- Show manager's office with halls A1, A2, A4, B1, B4, C, D2 and E1
- air conditioning and lighting during show hours
- registration office with Halls A,B,C and D
- · parking lot shuttles during show hours
- house public address system
- · molded plastic chairs
- two standard analog telephone/fax/modem lines with one (1) voice mail box
- meeting rooms

Personnel:

- · cleaning meeting rooms and areas other than carpeted exhibit areas
- information counter attendant
- traffic circle attendant
- shuttle bus drivers
- · event utility labor

Meeting Rooms:

- wired microphones (up to three per room)
- tables clothed (excluding exhibit tables)
- lectern (one per room)
- note pads and pencils
- head tables skirted
- padded chairs
- water service
- risers

Show Manager's Office:

A1 229 square feet, unfurnished

A2 454 square feet, unfurnished

A4 550 square feet, furnished

B1 657 square feet, furnished

B4 792 square feet, unfurnished

C 1989 square feet, unfurnished

D2 1800 square feet, furnished

E1 1800 square feet, furnished

NOTE: Equipment is provided within the limits of the Center's inventory, list available upon request. All equipment set for duration of show; room change charges will apply when room set change occurs during show days.

OFFICIAL SPECIMEN



Member 5

