

**112000001168**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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Voluntary Cancellation

112-1168

01/04/13--01024--005 \*\*102.50

**N. CAUSSEAU**  
Jan 7 2013  
**EXAMINER**

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PRIMANTI BROS. PIZZA & GRILL**

(Name of Mark to be cancelled)

The enclosed Application for the Cancellation of a Trademark and/or Service Mark and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

**Steven J. Wadyka, Jr.**

(Contact Person)

**Greenberg Traurig, LLP**

(Firm/Company)

**2101 L Street, NW, Suite 1000**

(Address)

**Washington, DC 20037**

(City, State and Zip Code)

For further information concerning this matter, please call:

**Steven J. Wadyka, Jr.**

(Name of Contact Person)

at ( **202** ) **331-3105**

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$50.00 Filing Fee

☒ \$102.50 Filing Fee and Certified Copy

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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

APPLICATION FOR THE CANCELLATION OF A  
TRADEMARK AND/OR SERVICE MARK

Pursuant to s. 495.101, Florida Statutes, the undersigned hereby submit(s) this application to cancel the following trademark and/or service mark registration:

1. Mark to be cancelled: PRIMANTI BROS. PIZZA & GRILL  
2. Registration Number: T12000001168  
3. Date of Registration: December 6, 2012  
4. Signature of Owner(s): [Signature]

Owner's Signature

Co-Owner's Signature, if any

Eric Kozlowski

Typed or Printed Name of Person Signing Above

Primanti Bros. of Ft. Lauderdale, Inc.

Typed or Printed Name of Owner

Typed or Printed Name of Co-Owner

STATE OF

Florida

COUNTY OF

Broward

Sworn to and subscribed by me on n this 27th day of December, 2012, Eric Kozlowski  
(Name of Individual Signing)

personally appeared before me, ☐ who is/are personally known to me or ☒ whose

identity (ies) I proved on the basis of FL Driver's License

(Seal)

Notary Public's Signature

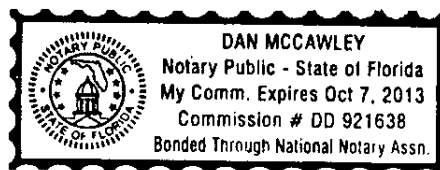
Notary Public's Printed Name

My Commission Expires: \_\_\_\_\_

(Attach additional sheet if necessary)

Filing Fee: \$50.00

Certified Copy (optional): \$52.50



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