

# T13000000019

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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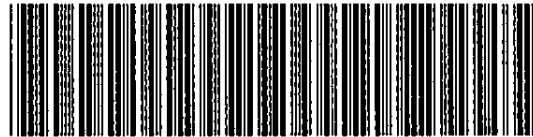
\_\_\_\_\_  
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SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
2013 JAN -3 AM 10:48

C. LEWIS

JAN 4 2013

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 5, 2012

DWARD L. BIRK / MARKS GRAY, P.A.  
P.O. BOX 447  
JACKSONVILLE, FL 32201

SUBJECT: BLUE "JAXCHAMBER" AND GREEN "HEALTH COUNCIL" WITH A  
STYLIZED BLUE AND GREEN JACKSONVILLE SKYLINE AND A GREEN  
TRIANGLE ON TOP OF THE "J".  
Ref. Number: W12000060491

We have received your document for BLUE "JAXCHAMBER" AND GREEN  
"HEALTH COUNCIL" WITH A STYLIZED BLUE AND GREEN JACKSONVILLE  
SKYLINE AND A GREEN TRIANGLE ON TOP OF THE "J". and your check(s)  
totaling \$87.50. However, the enclosed document has not been filed and is being  
returned for the following correction(s):

Although we received your application and check(s), no specimens were  
included. Section 495.031(5), F.S., requires every trademark and/or service mark  
application to be accompanied by three specimens (or examples). Please submit  
three specimens for each class of registration. (NOTE: Letterhead, stationery,  
envelopes, invoices and mailing labels are not accepted.)

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) 245-6051.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 112A00028847

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JAXCHAMBER Health Council

(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:

Edward L. Birk

(Name of Person)

Marks Gray, P.A.

(Firm/Company)

P.O. Box 447

(Address)

Jacksonville, Florida 32201

(City/State and Zip Code)

For further information concerning this matter, please call:

Edward L. Birk

(Name of Person)

at ( 904 ) 398-0900

(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.)

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

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

2013 JAN -3 AM 10:48

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: Jacksonville Regional Chamber of Commerce

(b) Owner's/Applicant's business address: 3 Independent Drive

Jacksonville, Florida 32202

City/State/Zip

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

City/State/Zip

(c) Owner's/Applicant's telephone number: 904 366-6600

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: Non-Profit Corporation

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: 754878

(2) Domicile State or Country: Florida

(3) Federal Employer Identification Number: 590306160

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.)

Services available to the Jacksonville community by the Health Council of the Jacksonville Chamber of Commerce

including business advocacy and service to the needs of members with the mission of driving economic growth in the area.

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.)

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:

Newspaper advertisements, business cards, brochures, flyers, pamphlets, websites,  
conferences, speaking engagements, meetings, promotional materials, good will trips

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:

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:

Class 35

**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: September 26, 2011

**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.)

Blue "JAXCHAMBER" and green "Health Council" with a stylized blue and green Jacksonville skyline and a green triangle on top of the "J."

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) Health or Council

\_\_\_\_\_ "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, Lisa Daniel, 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.

Lisa Daniel

Typed or printed name of applicant

Lisa Daniel

Applicant's signature  
(List name and title)

STATE OF Florida

COUNTY OF Duval

Sworn to and subscribed before me on this 16<sup>th</sup> day of October

2012

LISA DANIEL

(Name of Individual Signing)

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



(Seal)

Edward L. Birk

Notary's Printed Name

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

**FILING FEE: \$87.50 per class**

# JAXCHAMBER

## Health Council

|  |           |           |  |            |                                   |
|--|-----------|-----------|--|------------|-----------------------------------|
| 21st Century Oncology of Jacksonville                    | Forabee   | Krista    | Financial Services                           | 9046455045 | www.21stcenturyoncology.com       |
| 21st Century Oncology of Jacksonville                    | Gabriel   | ShirRay   | Financial Services                           | 9046455045 | www.21stcenturyoncology.com       |
| 21st Century Oncology of Jacksonville                    | Scaz      | Kendra    | Financial Services                           | 9046455045 | www.21stcenturyoncology.com       |
| 21st Century Oncology of Jacksonville                    | Shelar    | Lisa      | Financial Services                           | 9046455045 | www.21stcenturyoncology.com       |
| Absolutely Home Healthcare/Ortho Home Health Care        | Young     | Debbie    | Health Care Services                         | 9048995520 |                                   |
| Adaptive CRM Solutions                                   | Frank     | Claire    | Consultants                                  | 9044604723 | www.adaptivecrmsolutions.com      |
| ADP Payroll Company                                      | Bush      | Jessica   | Payroll Service                              | 9044707018 | www.adp.com                       |
| Aerotek  | Gesek     | Brad      | Employment                                   | 9045275601 | www.aerotek.com                   |
| AFLAC-Wanda Fort   | Fort      | Wanda     | Insurance                                    | 9043077421 | www.aflac.com                     |
| Akerman Senterfitt                                       | Prom      | Stephen   | Attorneys                                    | 9047983700 | www.akerman.com                   |
| Akra Professional Services Inc.                          | Akra      | Louis     | Health Care Services                         | 9043799327 | www.akraservices.com              |
| All Saints Catholic Nursing & Rehabilitation Center Inc. | Lee       | Brenda    | Rehabilitation Services                      | 9047721220 | www.allsaintsnursing.org          |
| Amcom Software   | Hull      | Graeme    | Information Technology                       | 9042082698 | www.amcomsoftware.com             |
| Amelia Urgent Care-River City                            | Matricia  | Sue       | Health Care Services                         | 9046960055 | ameliaurgentcare.com              |
| American Diabetes Association                            | Schropp   | Stephanie | Non-Profit Organizations                     | 9047307200 | www.diabetes.org                  |
| Ameris Bank  | Putnam    | Lori      | Banks  | 9044462567 | www.amerisbank.com                |
| Any Lab Test Now!  | Griffiths | Michael   | Health, Fitness & Wellness                   | 9042204840 | anylabtestnow.com/jacksonville_fl |
| Ash Properties Inc.                                      | Bjork     | Erika     | Real Estate Developers                       | 9048994611 | www.ashpropertiesinc.com          |
| Auld & White Constructors LLC                            | Durand    | Teresa    | Contractors                                  | 9042962555 | www.auld-white.com                |
| Bailey's Powerhouse Gym                                  | Starks    | Addie     | Health, Fitness & Wellness                   | 9047421379 | www.baileysgym.com                |
| Bank of America Merrill Lynch                            | Pasket    | Terry     | Banks  | 9042185974 | www.bankofamerica.com             |
| Bergmann Associates                                      | Suebben   | Mick      | Engineers                                    | 9043633133 | www.bergmannpc.com                |
| Beson4 Media Group                                       | Robinson  | Lori      | Publishers                                   | 9049929945 | www.beson4media.com               |
| Bio-Haz Solutions Inc.                                   | Henritzy  | Kipp      | Waste Reduction, Disposal & Recycle Services | 4846951064 | www.bio-haz.com                   |

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