T14000001043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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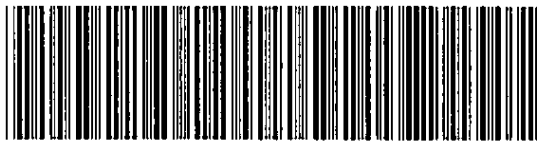

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06/05/19--01013--013 **87.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
JUN 18 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EW AND DESIGN
(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:

Erica M. Cipparone
(Name of Person)

Beusse Wolter Sanks & Maire, PLLC
(Firm/Company)

390 North Orange Avenue, Suite 2500
(Address)

Orlando, FL 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

Erica M. Cipparon at (407) 926-7714
(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

Name and Mailing Address of Owner:

Elite Corporate Wellness, LLC
486 Mohave Terrace
Lake Mary, FL 327746

Return To: Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1) Mark Registered: EW AND DESIGN

2) Registration Number: T14000001043

3) Date Filed: 09/23/2014 4.) Renewal Date: 09/23/2019 5.) Class(es) Filed: 41

6) Renewal statement pursuant to section 495.071, Florida Statues. Below you must state the mark is still in use in Florida or state the reason for its nonuse is not due to any intention to abandon the mark.

The mark is still in use in Florida.

7) If the mark is still in use, a specimen showing actual use of the mark is included with this application.

8) If applicant is a business entity, enter the state of incorporation/formation/organization: Florida

Marty J. Priest
Typed or ~~Printed Name~~ of Owner

Owner's Signature or ~~Authorized~~ Person's Signature

STATE OF FLORIDA

COUNTY OF SEMINOLE

Sworn to and subscribed before me on this 29TH day of MAY 2019. MARTY PRIEST
(Name of Individual Signing)

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

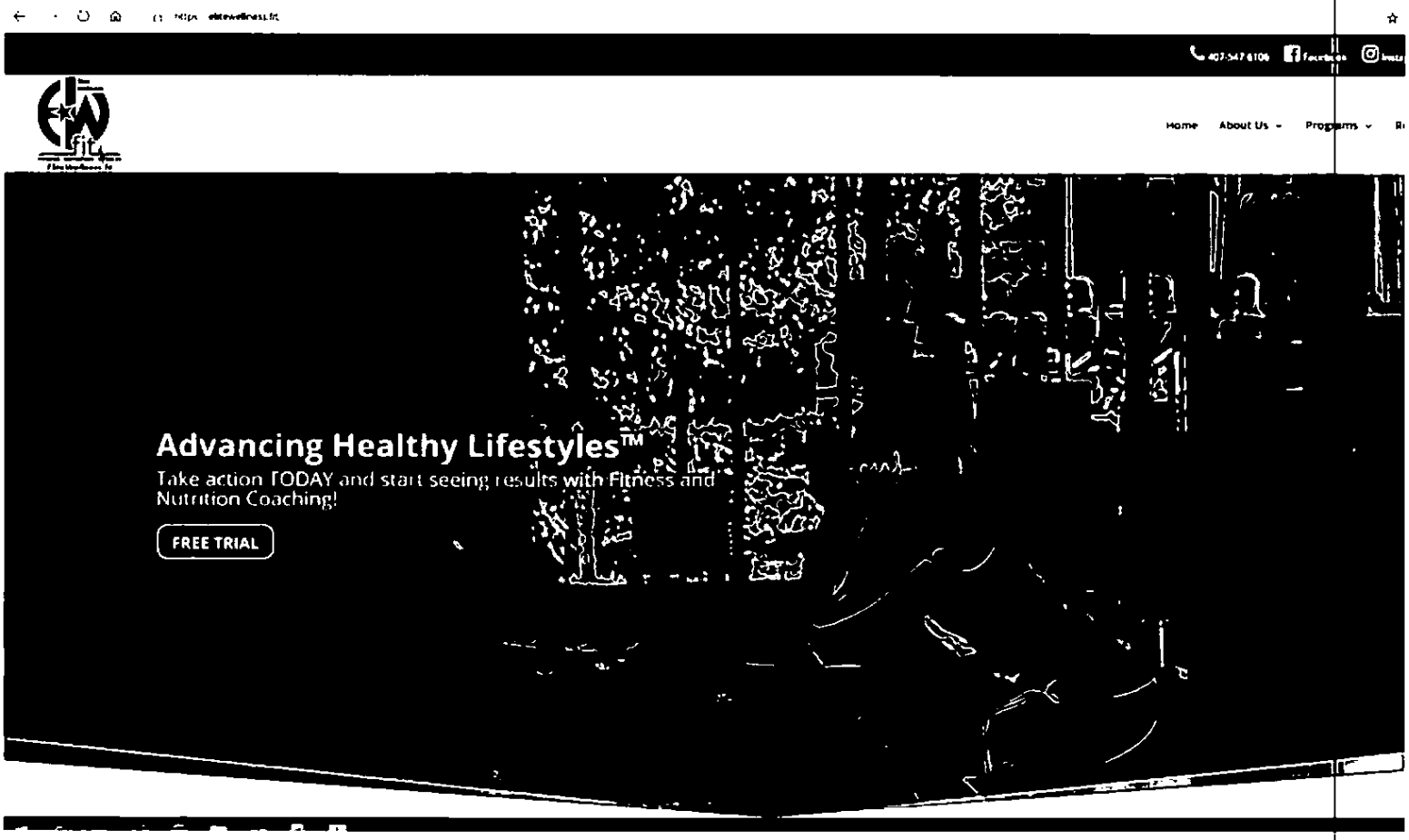
(Seal)

Notary Public's Signature

RYAN CIPPARONE
Notary Public's Printed Name

Fee: $87.50 Per Class
Certificate of Renewal : $8.75 (Optional)
CR2E005 (1/11)

RYAN CIPPARONE
MY COMMISSION # FF897781
EXPIRES July 09, 2019
(407) 398-0153 FloridaNotaryService.com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