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N. CAUSSEAUX MAY 1 7 2017



April 12, 2017

Division of Corporations PO Box 6327 Tallahassee, FL 32314

Attn: Nanette Causseaux

RE: Letter No. 317A00006587

Please cancel our request for a service mark for the word "VAJUVENATION". We have pulled our ads for this procedure name. We are applying for another service with the name of "VAGICAL". Is it possible to transfer the \$87.50 we paid for "VAJUVENATION" to the service mark request for "VAGICAL"? The application and proof of advertising is attached to this letter. Thank you in advance for your help in this matter.

Thank you,

GEOF Owner

APR 16 P

#### **COVER LETTER**

TO: Registration Section

. , Division of Corporations,

SUBJECT: Vagical

(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:

#### Richard Goren

(Name of Person)

Shino Bay Cosmetic Dermatology and Laser Institute

(Firm/Company)

350 E. Las Olas Blvd, Suite 110

(Address)

Ft. Lauderdale, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Goren

<sub>at</sub> 954

765-3005

(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

April 27, 2017

RICHARD GOREN SHINO BAY COSMETIC DERMATOLOGY & LASER 350 E. LAS OLAS BLVD., SUITE 110 FT. LAUDERDALE, FL 33301

SUBJECT: VAGICAL

Ref. Number: W17000036174

We have received your document for VAGICAL and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The notary public's acknowledgement is incomplete. The seal, signature, and expiration date must be affixed. A notary public cannot notarize his own signature.

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.

Letter Number: 717A00008232

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org

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

TO:

Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

#### PART I

(a) Owner's/Appl	licant's name: Shino Bay Co	smetic Dermato	logy and Laser Insitute
(b) Owner's/Appl	licant's business address: 350 E	. Las Olas Blv	d, Suite 110
(5) 5	Ft. Laud	erdale, FL 3330	01
		City/	State/Zip
If different, Owner's/A	applicant's mailing address:		
		City/	State/Zip
(c) Owner's/Applic	eant's telephone number: ()		
Check the appropriate	box to indicate the Owner/Applicant	is a(n):	
Individual	□ Corporation	□Joint Venture	Limited Liability Company
☐ General Partner	ship D Limited Partnership	□Union	Other:
If the Owner/Applican of State. If the Owner country under the law employer identification	t is a business entity, the business ent r/Applicant is <u>not</u> an individual, ente s of which the business entity is cur n number (EIN) in #3.	ity must have an active filing r the business entity's Florid rently formed, organized or	or registration on file with the Florida Departmen a registration/document number in #1, the state of incorporated under in #2, and the entity's federa
(1) Florida registration	n/document number: <u>LOS</u> -	42255	
(2) Domicile State or (	Country:	<u> </u>	
(3) Federal Employer	Identification Number: 20-297819	01	
service the mark is a	service mark If the mark is a servi	ce mark, the applicant/owner	logan being registered in connection with a type of must list the specific service(s) the mark is being use painting services, wholesale and retail sales of ble in the market place, enter the specific service(s
	complete assumently being wondowed by	he owner/applicant Do not	include future services.)
(Note: List only those	services currently being rendered by	ne owner appreara. Do not	

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:
Advertisement in newspapers, magazines, TV, video productions, on-line advertision, social media for the
advertisement of a service to tighten the lining of the vagina
TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a product manufactured by or fore 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) <u>FEE(S) AND CLASS(ES)</u> : 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:  44

#### 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: 3/15/2017
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.)
Vagical
•
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)"
"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 1 #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:

, Richard Goren	, being sworn, depose and say that I am	the owner and the applicant
verein, or that I am authorized to sign on behalf of the except a related company has registered this mark in thereof or in such near resemblance as to be likely, w we ause mistake or to deceive. I make this affidavit an we ad the application and know the contents thereof an	this state or has the right to use such mark in Florida	a either in the identical form
Richard Gor	/	
<i>ን</i>	ped or printed name of applicant	SEC DIVISIO 2017 I
	Applicant's signature	SECRETARY VISION OF C
TATE OF FLORIDA	(Eist name and title)	O'T'm
OUNTY OF BROWARD	_	OF STATE RPORATIONS AM 10: 23:
worn to and subscribed before me on this 7th day	y of April , 2017 Richard G	oren
	(Name of I	ndividual Signing)
who is personally known to me whose is	dentity I proved on the basis of	<del></del>
	Notary Public	Mlku
(Seal)	Lee D. Nelson	Signature
<b>*****</b>	Notary's Printe	ed Name
LEE D. NELBON Notary Public - State of Florida Commission # FF 195130 My Comm. Expires Feb 24, 2019	My Commission Expires: 2/24/2019	

FILING FEE: \$87.50 per class

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#] OFFICE IN THE ENTIRE UNITED STATES FOR SCULPTRA® AESTHETIC TREATMENTS! MASTERS OF THE ULTIMATE, NATURAL LOOKING, "AGELESS TRANSFORMATIONS."













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DR. SHINO BAY AGUILERA

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