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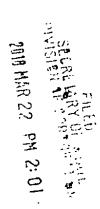
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N. CAUSSEAUX MAR 2 3 2018

COVER LETTER

TO: Registration Section Division of Corporations

BVL INCOME TAX

The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ORLANDO R. PEREZ

BVL INCOME TAX & ACCOUNTING SERVICE, INC.

(Firm/Company)

704 VIRGINIA LANE

(Address)

APOPKA, FL. 32703
(City/State and Zip Code)

For further information concerning this matter, please call:

DRLANDO R. PEREZ at 407

(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

March 8, 2018

ORLANDO R. PEREZ BVL INCOME TAX & ACCOUNTING SERVICE, INC 704 VIRGINIA LANE APOPKA, FL 32703

SUBJECT: BLV INCOME TAX Ref. Number: W18000022386

We have received your document for BLV INCOME TAX and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The specimens provided this office are not acceptable; we need three permanent specimens, which may be the same or different. We do not accept camera ready copies. We do not accept specimens which have been altered or defaced in any manner. In order to register your service mark, we need specimens from which we can determine the services being rendered. We will accept brochures, newspaper, or magazine advertisements, or business cards. If business cards are used, we must be able to determine from the business card the services offered. The mere mark, address, city, etc., on the business card, brochure, or advertisement is not acceptable -- we must be able to look at the specimens provided and be able to determine the services being rendered. We need specimens for each class of registration. We DO NOT accept letterhead, stationery, envelopes, invoices or mailing labels.

Please attach your specimens to a copy of this letter or to your corrected application, if it was returned to you for correction(s), and return it/them to this office for processing.

We do not accept "A PROOF OF A BUSINESS CARD", "LETTERHEADS" or "CAMERA READY COPIES".

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: 018A00004674

Nanette Causseaux Regulatory Specialist II Supervisor

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) Ourselott and ourselouse of the live o | TAX & ACCOUN | ITNG SERVICE, INC. 🧐 🦠 |
|--|---|--|
| (a) Owner's/Applicant's name: B.V.L. INCOME (b) Owner's/Applicant's business address: 704 V APOPK | IRGINIA LAI A, FL. 3270 | NE E |
| If different, Owner's/Applicant's mailing address: | City/ | State/Zip P P P P P P P P P P P P P P P P P P P |
| (c) Owner's/Applicant's telephone number: (407)7 | '19-0878 | State/Zip O |
| Check the appropriate box to indicate the Owner/Applicant | | |
| ☐ Individual ☐ Corporation | □Joint Venture | ☐ Limited Liability Company |
| ☐ General Partnership ☐ Limited Partnership | □Union | □ Other: |
| If the Owner/Applicant is a business entity, the business ent of State. If the Owner/Applicant is <u>not</u> an individual, enter country under the laws of which the business entity is cur employer identification number (EIN) in #3. | / | 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 |
| D4700004C | 108 √ | |
| (1) Florida registration/document number: P1/0000162 | | |
| (1) Florida registration/document number: P170000164 (2) Domicile State or Country: FLORIDA | | |
| Florida registration/document number: P170000162 Domicile State or Country: FLORIDA Federal Employer Identification Number: 74-304300 | | |
| (2) Domicile State or Country: FLORIDA | 04 e name, logo, design and/or see mark, the applicant/ownerservices, dianer services, ho | slogan being registered in connection with a type or must list the specific service(s) the mark is being use painting services, wholesale and retail sales or |
| (2) Domicile State or Country: FLORIDA (3) Federal Employer Identification Number: 74-304300 2. (a) SERVICE MARK: If the owner/applicant is using the service, the mark is a service mark. If the mark is a service used in connection with. For example: furniture moving tractor equipment, etc. If the owner/applicant is using the mark is a service mark. | o name, logo, design and/or see mark, the applicant/ownerservices, diaper services, hoark to identify services availa | slogan 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 the market place, enter the specific service(s) |
| (2) Domicile State or Country: FLORIDA (3) Federal Employer Identification Number: 74-304300 2. (a) SERVICE MARK: If the owner/applicant is using the service, the mark is a service mark. If the mark is a service used in connection with. For example: furniture moving tractor equipment, etc. If the owner/applicant is using the mark is a service mark. | of the owner/applicant. Do not | slogan 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) include future services.) |

| 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. (e) 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: |
| SOCIAL MEDIA, INTERNET, GOOGLE, BUSINESS CARDS, FLYERS |
| 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: CLASS 36 |
| |

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.

| 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: 05/10/2002 |
| 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.) |
| BVL INCOME TAX |
| |
| |
| |
| 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)" "INCOME TAX" |
| "ADADT EDOM THE MADIC AC CHOWN |

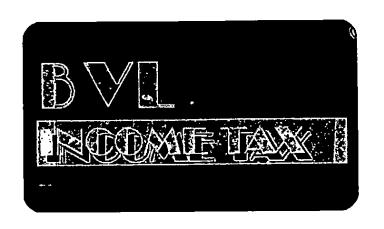
3. ATTACH OR INCLUDE THREE SPECIMENS OR EXAMPLES OF THE TRADEMARK OR SERVICE MARK BEING REGISTERED

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:

| , ORLANDO R. PER | EZ being sworn, depose and say that I am the owner and the applicant |
|---|---|
| except a related company has re thereof or in such near resemble cause mistake or to deceive. I | being sworn, depose and say that I am the owner and the applicant to sign on behalf of the owner and applicant herein, and to the best of my knowledge no other person registered this mark in this state or has the right to use such mark in Florida either in the identical form the action ince as to be likely, when applied to the goods or services of such other person to cause confusion, to make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have the contents thereof and that the facts stated herein are true and correct. |
| | ORLANDO R. PEREZ |
| | Typed or printed name of applicant |
| | 116/2 |
| <i>-</i> / | Applicant's signature (List name and title) |
| STATE OF Horn | da |
| COUNTY OF | ola |
| Sworn to and subscribed before | me on this day of Ma-ch 3018 Orlando ferez (Name of Individual Signing) |
| who is personally known | to me whose identity I proved on the basis of |
| S Ima | ry Public State of Florida L Davila Commission FF 981314 Lonida FF 981314 |
| | Notary's Printed Name |
| 2: 01 | My Commission Expires: 04/26/2020 |
| | FILING FEE: \$87.50 per class |
| 14 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18 | Page 4 of 4 |

OFFICIAL SPECIMEN



OFFICIAL SPECIMEN

