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300316430803

07/31/18--01014--013 \*\*96.25



K. SALY SEP 13 2018



August 21, 2018

RADIOLOGY IMAGING ASSOCIATES R.J. RAFFA, M.D. 1825 SE TIFFANY AVE, STE. 104 PORT ST. LUCIE, FL 34952-7554

SUBJECT: RADIOLOGY IMAGING ASSOCIATES & DESIGN 3 DIMENSIONAL

SQUARE BEING SPLIT INTO 4 QUARTERS

Ref. Number: T09836

Confirmation number: 300316430803 Pin Number: a Florida Corporation

We have received your document for RADIOLOGY IMAGING ASSOCIATES & DESIGN 3 DIMENSIONAL SQUARE BEING SPLIT INTO 4 QUARTERS and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above referenced mark expired on October 3, 2013. Please resubmit your filing in the form of a new mark application. We are enclosing the form and instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 118A00017298

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SEP 0 6 2018

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

**SUBJECT:** Radiology Imaging Associates

(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:

R.J. Raffa, M.D.

(Name of Person)

### Radiology Imaging Associates

(Firm/Company)

1825 SE Tiffany Avenue, Suite 104

Port St. Lucie, FL 34952-7554

(City/State and Zip Code)

For further information concerning this matter, please call:

Eileen Wilson

(Name of Person)

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.)

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

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK 18 SEP -6 AH 10: 10

SECRETARY OF CHAPTER 495, FLORIDA STATUTES

#### PART I

and/or Service Mark on the re	pords of the Florida Department of	State. GING ASSOCIAT	entity to be listed as the owner of the Trademan	rk
	1825 S	E Tiffany Avucie, FL 34	venue, Suite 104 952-7554	
If different, Owner's/Applica	ant's mailing address:	· · · · · · · · · · · · · · · · · · ·	·	
(c) Owner's/Applicant's t	772 39		tate/Zip	_
••	indicate the Owner/Applicant is a	(n):		
	2 Corporation	□Joint Venture	☐ Limited Liability Company	
☐ General Partnership 【	Limited Partnership	Union	Other:	
If the Owner/Applicant is a book of State. If the Owner/Appl country under the laws of wemployer identification numbers.	icant is <u>not</u> an individual, enter the hich the business entity is current	nust have an active filing business entity's Florida ly formed, organized or i	or registration on file with the Florida Departme registration/document number in #1, the state neorporated under in #2, and the entity's feder	nt or ral
(1) Florida registration/docu	ment number: 602067		<del></del>	
(2) Domicile State or Countr	y: Florida			
	fication Number: <u>59-1288427</u>	- <u>-</u>		
2. (a) SERVICE MARK: It service, the mark is a service used in connection with Fe	the owner/applicant is using the nate mark. If the mark is a service r	ime, logo, design and/or sl nark, the applicant/owner	ogan being registered in connection with a type must list the specific service(s) the mark is bei se painting services, wholesale and retail sales ble in the market place, enter the specific service	of lo
(Note: List only those service	es currently being rendered by the	owner/applicant. Do not i	nclude future services.)	
Diagnostic Ra	diology Services	: Radiology. 1	ET DEXA, VItrasouna	1.
	ledicine, CT 3		, liamningraphy	<b></b> /

2. (b) <u>TRADEMARK</u> : If the owner/applicant is using the name, logo, design and/or slogan being registed product manufactured by the owner/applicant or on the owner/applicant's behalf, the mark is a trademark applicant/owner must list the specific product(s) the name, logo, design and/or slogan is being used to sportswear, cat food, barbecue grills, shoe laces, etc. <u>If the owner/applicant is using the name, logo, design and/or slogan is being used available in the market place, enter the specific product(s) the name, logo, design and/or slogan is being used</u>	. If the mark is a trademark, the pidentify For example: ladies
(Note: List only those product(s) currently available. Do not include future products.)	· t
	72 <b>6</b>
	FR B T
	<u> </u>
2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY USED:	A F TO SHEET
SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connection with a t form(s)/mean(s) of advertisement the applicant/owner is using to advertise the services to the general advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a temperature of the services to the general advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a temperature of the services to the general advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a temperature of the services to the general advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a temperature of the services to the general advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a temperature of the services to the general advertisements of the services to the general advertisements.	al public. For example: newspaper
The business name and logo are printed on business cards, flyers, pamphlets, letterhead, advertising our medical ser	rvices provided at our offices.
TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a product manufaryou must specify how the mark is applied or affixed to the actual product or its packaging. For example: the actual product, etc. If the mark is being used in connection with a specific product, state how the name or affixed to the actual product(s) or the packaging:	a tag, label, imprinted or engraved on
2. (d) <u>FEE(S) AND CLASS(ES)</u> : There are a total of 45 classes or categories in which all products or s fee to register a mark is \$87.50 per class. Make check payable to Florida Department of State.	services must be categorized. The
List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and/or 2(b) above:	
Service Mark Class 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: March 31, 1988
(a) Date first used in other state or country, if applicable:  (b) Date first used in Florida: March 31, 1988  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.)
Radiology Imaging Associates & Design 3 Dimensional Square Being Split Into 4 Quarters
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 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:

<sub>/,</sub> R.J. Raffa, M.D.	being sworn, depose and say that I am the owner and the applicant
except a related company has registered this mark in this s. thereof or in such near resemblance as to be likely, when a	ner and applicant herein, and to the best of my knowledge no other person tate or has the right to use such mark in Florida either in the identical form applied to the goods or services of such other person to cause confusion, to rification on my/the applicant's behalf. I further acknowledge that I have
R.J. Raffa, M.	
Typed	or printed name of applicant
• •	Applicant's signature (List name and title)
STATE OF Florida	OF ST.
COUNTY OF St. Lucie	三
Sworn to and subscribed before me on this $5\%$ day of	Septemberson RJ Raffa MD (Name of Individual Signing)
who is personally known to me unwhose identit	ty I proved on the basis of
Notary Public State of Florida Elleen M Wilson My Commission GG 116567 Expires 06/20/2021	EILEEN M. WILSON Notary's Printed Name
	My Commission Expires: 00 80 HO2

FILING FEE: \$87.50 per class





it unable to keep appointment kindly give 24 hours notice www.radiologyimagingassoc.com

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Date:	At:	

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