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## **COVER LETTER**

Division of Corporations    Corporation   Division of Corporations   Divisi		
SUBJECT:		
	to be cancelled)	
The enclosed Application for the Cancellation of filing.	of a Trademark and/or Service Mark and fee(s) are submitted for	
Please return all correspondence concerning this	s matter to:	
Bryan M Fandino		
(Contact Person)		
Jewelers of America LLC		
(Firm/Company)	<del></del>	
18351 NW 27TH AVE		
(Address)		
MIAMI GARDENS, FL 33056		
(City, State and Zip Code)		
For further information concerning this matter, Bryan M Fandino	954 512-3942	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amount:		
□ \$50.00 Filing Fee	■ \$102.50 Filing Fee and Certified Copy	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

CR2E077 (1/11)

## APPLICATION FOR THE CANCELLATION OF A TRADEMARK AND/OR SERVICE MARK

Pursuant to s. 495.101, Florida Statutes, the undersigned hereby submit(s) this application to cancel the following trademark and/or service mark registration:

Mark to be cancelled:	
T190000049 2. Registration Number:	7
3. Date of Registration: 04/23/2019	
4. Signature of Owner(s):	eg.
Owner's Signature Bryan M Fandino	Co-Owner's Signature, if any
Typed or Printed Name of Person Signing Above Jewelers of America LLC	Co-Owner's Signature, if any  Typed or Printed Name of Person Signing Above  Typed or Printed Name of Co-Owner
Typed or Printed Name of Owner Florida	Typed or Printed Name of Co-Owner
Miami Dade COUNTY OF	_
Sworn to and subscribed by me on n this	March day of, 20, Bryan M. Fandino , (Name of Individual Signing)
personally appeared before me, who is/are	personally known to me or □ whose
identity (ies) I proved on the basis of  Notary Public State of Florida DIANA P DORESTE My Commission HH 033644 Expires 08/18/2024	Notary Public's Signature  Diana P. Doies C  Notary Public's Printed Name
My Commission Expires: Aug 18, 202	<u>4</u>
(Attach additional sheet if necessary)	
Filing Fee: \$50.00 Certified Copy (optional): \$52.50	