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# **COVER LETTER**

IO:	Division of Corporations				
	FXM RESEARCH				
SUBJI	ECT:	()( )			
	(Mark to be registered)				
The en	closed Trademark/Service Mark Applica	ation, specimens and	fee(s) are submitted for filing.		
Please	return all correspondence concerning the	is matter to the follow	ving:		
Erik I	Lichter				
	(Name of Person)	<u>_</u> .	_		
The I.	Lichter Law Group				
	(Firm/Company)		<del></del>		
5805	Blue Lagoon Drive, Suite 165				
	(Address)	<del></del> .	_		
Miam	ni, FL 331 <b>2</b> 6				
	(City/State and Zip Co	nde)	<del>_</del>		
For fur	ther information concerning this matter,	please call:			
Erik I	Lichter	305	894-6750		
	(2)	at (	e & Daytime Telephone Number)		
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)		
	Mailing Address:		Street Address:		
	Registration Section		Registration Section		
	Division of Corporations		Division of Corporations		
	P.O. Box 6327		The Centre of Tallahassee		

(<u>NOTE</u>: The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# 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

1. OWNER/APPLICANT: Enter the name and address of the individual or the business entity to be listed as the owner of the Trademark and/or Service Mark on the records of the Florida Department of State.
275 A 4 701 1 1 4 5 5 1 4 5 5 1 4 5 5 5 1 4 5 5 5 5
(a) Owner's/Applicant's name:    FXM Clinical Research Miami, LLC.
Miami, FL 33175
City/State/Zip
If different, Owner's/Applicant's mailing address:
City/State/Zip 786 590-1567
(c) Owner's/Applicant's telephone number: ()
Check the appropriate box to indicate the Owner/Applicant is a(n):  ☐ Individual ☐ Corporation ☐ Joint Venture ☐ Limited Liability Company ☐ General Partnership ☐ Limited Partnership ☐ Union ☐ Other:
If the Owner/Applicant is a business entity, the business entity must have an active filing or registration on file with the Florida Department of State. If the Owner/Applicant is not an individual, enter the business entity's Florida registration/document number in #1, the state or country under the laws of which the business entity is currently formed, organized or incorporated under in #2, and the entity's federal employer identification number (EIN) in #3
(1) Florida registration/document number: <u>L18000174579</u>
(2) Domicile State or Country:
(3) Federal Employer Identification Number: 83-1353052
2. (a) <u>SERVICE MARK</u> : If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with a type of service, the mark is a service mark. If the mark is a service mark, the applicant/owner must list the specific service(s) the mark is being used in connection with. For example: furniture moving services diaper services, house painting services, wholesale and retail sales of tractor equipment, etc. If the owner/applicant is using the mark to identify services available in the market place, enter the specific service(s) being rendered here
(Note: List only those services currently being rendered by the owner/applicant. Do not include future services.)  Clinical research, pharmaceutical product testing, medical data.

2. (b) <u>TRADEMARK</u> : If the owner/applicant is using the name, logo, design and/connection with an actual product manufactured by the owner/applicant or on the owner is a trademark. If the mark is a trademark, the applicant/owner must list the specific	r/applicant's behalf, the mark
design and/or slogan is being used to identify. For example: ladies sportswear, cat foo etc. If the owner/applicant is using the name, logo, design and/or slogan to identify place, enter the specific product(s) the name, logo, design and/or slogan is being used to	d, barbecue grills, shoe laces, goods available in the market
(Note: List only those product(s) currently available. Do not include future products.)	
	70. 22
	<u>新生</u>
2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY US	SED:
SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connumust specify the form(s)/mean(s) of advertisement the applicant/owner is using to advertise. For example: newspaper advertisements, business cards, brochures, flyers, pa is being used in connection with a type of service, state how the name, logo, design a advertising here:	vertise the services to the general mphlets, menus, etc. If the mark
The service mark is used to to provide clinical research and data. The service mark is used in Newspaper ad	lvertisements, flyers, business cards,
television advertisements, and radio advertisements	
TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identifore the applicant/owner, you must specify how the mark is applied or affixed to the act example: a tag, label, imprinted or engraved on the actual product, etc. If the mark is specific product, state how the name, logo, design and/or slogan is applied or affixe packaging:	ual product or its packaging. For being used in connection with a
2. (d) <u>FEE(S) AND CLASS(ES)</u> : There are a total of 45 classes or categories in which be categorized. The fee to register a mark is \$87.50 per class. Make check payable to	all products or services must 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( Class 42	b) above:

### 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: 06/01/2000
(a) Date first used in other state or country, if applicable:  (b) Date first used in Florida: 06/01/2000  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.)
FXM Research - A red oval with a white border and the letters "FXM Research" in white inside the oval
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)" Research  " 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:

[. Etik Lichter as Attorney-in-Fact for FNM Clinical Research Miami, LLC.], being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and to the best of my knowledge no other person except a related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, to cause mistake or to deceive. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct.

Erik Lichter - Attorney-in-Fact for FXM Clinical Research Miami, vped or printed name of applicant Applicant's signature (List name and title) Florida STATE OF COUNTY OF Erik Lichter as Attorney-in-Fact for FXM Clinical 2020 Research Miami, LLC personally appeared before me. who is personally known to me whose identity I proved on the basis of ADRIAN ACOSTA Notary Public-State of Florida Commission # GG 325586 My Commission Expires May 29,2023 (Seal)

FILING FEE: \$87.50 per class

My Commission Expires:



# ITS NOT JUST CLINICAL RESEARCHI

Founded in the year 2000, FXM Research is a privately owned and operated Clinical Research Site that conducts phase II, III, and IV clinical research trials specializing in Dementology. Throughout the years, our ability to deliver aggressive, time bound enrollment goals, while providing trustworthy data to Pharmaceutical companies and CROs, has carned FXM Research a great deal of notoriety and fame within the Demantology research industry.

Today, FXM Research's success is widely regarded throughout our four operating branches: FXM Research Corp., based in Miant, Florida and home of our headquarters, FXM Research Miranax, located in the city of Miranax, Florida and FXM Research International, including two branches in Belize City, Central America.

# **OUR MISSION**

At the core of our business and operating systems, **FXM Research** mission is to support pharmaceutical companies and CROs with introducing new and approved FDA medications successfully into the marketplace. We perform this efficiently and effectively by providing the highest quality service in a timely fashion and at the lowest possible cost.

- We specialize in conducting phase II, III, and IV Dermatology Clinical Trails
- . Our primary concerns are subject safety and adherence to the protocol.
- Turnover time for Regulatory Documents, budgets, and contracts is usually 24 to 48 hours.

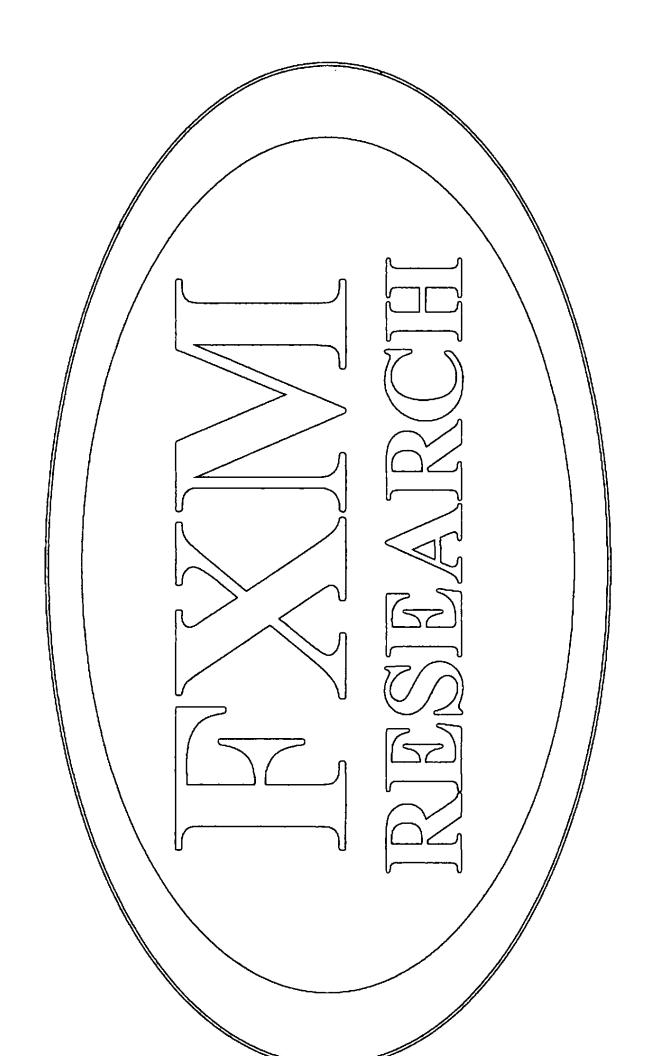
# **OUR SUCCESS**

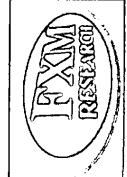
- We offer experienced, trained, and bilingual personnel (English and Spanish), who interact with our subjects, sponsors, and CROs as a cohesive team.
- Our Principal Investigators are Board Certified Dermatologists and Certified Clinical Research Investigators with many years of extensive experience. They are located onsite and are available full-time.
- Most subjects are recruited from the office of our PI's private practice, and/or FXM Research's extensive clinical database. We draw heavily from a Spanish speaking population, a group often under-represented in clinical trials. We also have continuing extensive experience with a pediatric population.
- We do whatever is necessary to accommodate our subjects' school and/ or work schedule, which maximizes compliance and retention.
- We are confident that we can surpass sponsors expectations relating to cost, subject enrollment/retention, and the quality of our work.

### TO CONTACT US

Francisco Moncada, R.N., B.S.N., C.C.R.C., President & Director of Clinical Research Email: info@fxmresearch.com • www.fxmresearch.com

**FXM Research Corp.** Hector Wiltz, M.D., C.C.T.I. (305) 220-5222 Office (305) 220-5779 Fax FXM Research Miramar Francisco Flores, MD (954) 430-1097 Office (954) 430-5502 Fax FXM Research International - Belize, Central America Julitta Bradley, MD & Ines Mendez-Moguel, MD (305) 220-5222 Office (305) 220-5779 Fax





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Newsketter ISSUE 20 / JAN 27<sup>th</sup>, 2020

Routine FDA Audit Update As Of January 27<sup>TH</sup>, 2020

www.fxmresearch.com