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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FL PATEL LAW PLLC

Account Number : I20170000097 Phone : (727)279-5037

: (727)888-1294 Fax Number

> Trademark/Servicemark Registration **#1 NY Beauty Supply**

Certificate of Registration	1
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# 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/Applicant's name: Number INY Beauty Supply, Inc.  (b) Owner's/Applicant's business address: 5050 34th Street South  Saint Petersburg, FL 33711  City/State/Zip  If different, Owner's/Applicant's mailing address: City/State/Zip  (c) Owner's/Applicant's telephone number: 708 674-9228  Check the appropriate box to indicate the Owner/Applicant is a(n): Joint Venture Limited Liabi General Partnership Limited Partnership Union Other:  If the Owner/Applicant is a business entity, the business entity must have an active filing or rethe Florida Department of State. If the Owner/Applicant is not an individual, enter the burgistration/document number in #1, the state or country under the laws of which the busin formed, organized or incorporated under in #2, and the entity's federal employer identification  P17000062273  P17000062273  P17000062273  P17000062273  P17000062273  P17000062273  P17000062273  P17000062273  P17000062273	ility Com	pany	
Saint Petersburg. FL 33711  City/State/Zip  If different, Owner's/Applicant's mailing address:  City/State/Zip  (c) Owner's/Applicant's telephone number:  City/State/Zip  City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/S	ality Com	AH 8: 39	
City/State/Zip  (c) Owner's/Applicant's telephone number:   (a) Owner's/Applicant's telephone number:   (b) Owner's/Applicant's telephone number:   (c) Owner's/Applicant's telephone number:   (d) Corporation	ality Com	ge US pany	
City/State/Zip  (c) Owner's/Applicant's telephone number:   Check the appropriate box to indicate the Owner/Applicant is a(n):  Individual Corporation Joint Venture Limited Liabingeneral Partnership Limited Partnership Union Other:  If the Owner/Applicant is a business entity, the business entity must have an active filing or rethe Florida Department of State. If the Owner/Applicant is not an individual, enter the businesstration/document number in #1, the state or country under the laws of which the busin formed, organized or incorporated under in #2, and the entity's federal employer identification  (1) Florida registration/document number:  P17000062273  (2) Domicile State or Country:  Florida  82-2250105	ility Com	pany	
(c) Owner's/Applicant's telephone number:   Check the appropriate box to indicate the Owner/Applicant is a(n):  Individual  Corporation  General Partnership  Limited Partnership  Union  Other:  If the Owner/Applicant is a business entity, the business entity must have an active filing or rethe Florida Department of State. If the Owner/Applicant is not an individual, enter the businesstration/document number in #1, the state or country under the laws of which the businformed, organized or incorporated under in #2, and the entity's federal employer identification  (1) Florida registration/document number:  Florida  Florida  SEPANICE MARK: If the owner/applicant is using the name, logo, design and/or sloss	ility Com	pany	
Check the appropriate box to indicate the Owner/Applicant is a(n):    Individual   Corporation   Joint Venture   Limited Liabia     General Partnership   Limited Partnership   Union   Other:     If the Owner/Applicant is a business entity, the business entity must have an active filing or rethe Florida Department of State. If the Owner/Applicant is not an individual, enter the business tration/document number in #1, the state or country under the laws of which the busin formed, organized or incorporated under in #2, and the entity's federal employer identification			
Check the appropriate box to indicate the Owner/Applicant is a(n):    Individual   Corporation   Joint Venture   Limited Liabia     General Partnership   Limited Partnership   Union   Other:     If the Owner/Applicant is a business entity, the business entity must have an active filing or rethe Florida Department of State. If the Owner/Applicant is not an individual, enter the business tration/document number in #1, the state or country under the laws of which the busin formed, organized or incorporated under in #2, and the entity's federal employer identification			
(2) Domicile State or Country: Florida  (3) Federal Employer Identification Number: 82-2250105  2. (A. SERAVICE MARK). If the owner/applicant is using the name, logo, design and/or slope.			e with lorida rently in #3.
(3) Federal Employer Identification Number: 82-2250105			
2 ( ) OFDAVOT MARK. He has owner/applicant is using the name logo design and/or slos			
connection with a type of service, the mark is a service mark. If the mark is a service mark must list the specific service(s) the mark is being used in connection with. For example: furn diaper services, house painting services, wholesale and retail sales of tractor equipment, etc. is using the mark to identify services available in the market place, enter the specific service(s).  (Note: List only those services currently being rendered by the owner/applicant. Do not incl. Retail store featuring hair extensions, wigs, beauty supplies, cosmetics, hair extensions, wigs, hair care, skin and beauty equipment and supplies for beauty salons.	gan being k, the appointure moved the second of the second	registo olicant/ ving se ner/app endered e servi	rvices, olicant here:

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2. (b) TRADEMARK: If the owner/applicant is using the name, logo, design and/or slogar connection with an actual product manufactured by the owner/applicant or on the owner/application is a trademark. If the mark is a trademark, the applicant/owner must list the specific product design and/or slogan is being used to identify. For example: ladies sportswear, cat food, barbetete. If the owner/applicant is using the name, logo, design and/or slogan to identify goods as place, enter the specific product(s) the name, logo, design and/or slogan is being used to identify	nn 3 UCH ct(s) the	name	logo
(Note: List only those product(s) currently available. Do not include future products.)			
	D 1.6	2020	<del>.</del>
	<b>*</b>	AP →	
	(A) (A)	5	
	241 €2 (5 ±113	<del>2</del>	[1]
2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY USED:	STATE STATES	AH 8: 39	<b>(</b>
SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connection we must specify the form(s)/mean(s) of advertisement the applicant/owner is using to advertise the public. For example: newspaper advertisements, business cards, brochures, flyers, pamphlets is being used in connection with a type of service, state how the name, logo, design and/or sladvertising here:	ne servici. . menus.	etc. I	f the mark
business cards, flyers, website, and social media			
TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a profore the applicant/owner, you must specify how the mark is applied or affixed to the actual proexample: a tag, label, imprinted or engraved on the actual product, etc. If the mark is being specific product, state how the name, logo, design and/or slogan is applied or affixed to the packaging:	used in c	onnect	tion with a
2. (d) FEE(S) AND CLASS(ES): There are a total of 45 classes or categories in which all probe categorized. The fee to register a mark is \$87.50 per class. Make check payable to Florida	oducts or	service	es must
List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and/or 2(b) about			State.
Class 35 -\$87.50			

→ 18506176383

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### 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.	и .,,	) 1)21	
(a) Date first used in other state or country, if applicable:	一番事例のの	2020 APR	,
07/24/2017	(A) (B)	<u>~</u>	Γ.
(b) Date first used in Florida:	rite.	_	Γſ
	SELFLORE	<u> </u>	£4
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PART III		39	
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 logo and/or design must be 25 words or less. List the exact name, slogan, and/or description here: (NOTE: The name, logo, design and/or slogan listed in this section must match the exact and/or slogan listed on your specimens or examples.)	z. The on of th it name	descrip le logo e, logo,	otion of design design
#1 NY Beauty Supply			
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 to be disclaimed. When you disclaim a specific term or design, you are acknowledging this term others and that you do not claim the exclusive right to use the disclaimed term or design. All ge representations of cities, states or countries must be disclaimed (i.e., Miami, Orlando, Florida, to of Florida, the design of the United States of America, etc.). Corporate suffixes and terms readispecific product(s) and/or(s) service being provided must also be disclaimed.	is com: ograph he desi	nonly i ical ter gn of t	ms and he state
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)"			
Beauty Supply "APART FROM THE MAR	K AS S	SHOW	N.

## 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:

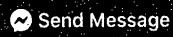
/. Mu	hammad Baker	, being sworn, denose and say that I am	the owner and the applicant herein,
related company has reg or in such near resemble mistake or to deceive. I	istered this mark in this state o ince as to be likely, when appl make this affidavit and verifice	being sworn, depose and say that I am and applicant herein, and to the best of my or has the right to use such mark in Florida lied to the goods or services of such other ation on mythe applicant's behalf. I furth facts stated herein are true and correct.	a either in the identical form thereof nerson to cause confusion, to cause
	7	Muhammad Baker	
	Me	red or printed name of applicant	
		Applicant's signature (List name and title)	
STATE OF FLORIDA COUNTY OF Pinellas			
Sworn to (or affirmed) a	nd subscribed before me by m April 2020, by (	means of physical presence or only  Muhammad Baker  nume of person making statement	ne notarization, this (numeric date) this ).
HIL Notary Pu	ARY ZALLA blic-State of Floridal sion # GG 922198 nmission Expires ober 13, 2023	Hilary Zalla Hilary Zalla	s Signature
Personally Known 📶 (	OR Produced Identification	•	, 3, (1,11,0)
Type of Identification P			2020 APR 16
	FILI	ING FEE: \$87.50 per class	R 16 AH 8: 39



### 1 NY Beauty Supply

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Saint Petersburg, Florida







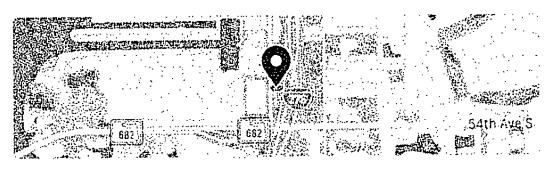


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