

T20000000464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

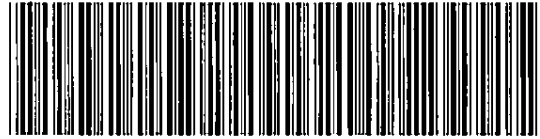
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2025 FEB 28 PM 5:17

SECRETARY OF STATE
TALLAHASSEE, FL

H. Jarvis
3/84

2/28

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANGELS HATCHERY
(Name of Mark Registered)

Dear Sir or Madam:

The enclosed Mark Renewal Application, specimen and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL RADICE
(Name of Person)

ANGELS HATCHERY
(Firm/Company)

16375 S.W. 256 STREET
(Address)

HOMESTEAD, FLORIDA 33031
(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL RADICE at (305) 248-7777
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILING FEE: \$87.50 per class

CERTIFICATE OF RENEWAL: \$ 8.75 (OPTIONAL)

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

FILED
2025 FEB 28 PM 5:17
SECRETARY OF STATE
TALLAHASSEE, FL.

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:

PAUL RADICE
16375 SW 256 STREET
HOMESTEAD, FLORIDA 33031

Return To: Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

1) Mark Registered: ANGELS HATCHERY

2) Registration Number: T20000000464

3) Date Filed: 5-4-20 4) Renewal Date: 5-4-25 5) Class(es) Filed: 0944

FIRST USED 10-1-72

6) Renewal statement pursuant to section 495.071, Florida Statutes. Below you must state the mark is still in use in Florida or state the reason for its nonuse is not due to any intention to abandon the mark.

YES, IT IS STILL IN USE.

7) If the mark is still in use, a specimen showing actual use of the mark is included with this application.

8) If applicant is a business entity, enter the state of incorporation/formation/organization: FLORIDA

Fee: \$87.50 Per Class

Certificate of Renewal: \$8.75
(Optional)

PAUL RADICE

Typed or Printed Name of Owner

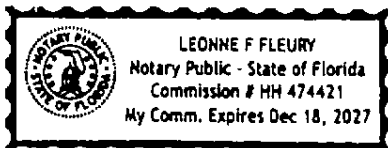
Paul Radice

Owner's Signature or Authorized Person's Signature

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this (numeric date) this 26th day of December, 2024, by Paul Radice (name of person making statement).



Leonne F. Fleury

Notary Public's Signature

Leonne F. Fleury

Notary Public's Printed Name

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____

18375 SW 25th STREET
HOMESTEAD, FL 33031
(305) 248-7777



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