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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : SWART BAUMRUK & COMPANY, LLP
Account Number : I20000000291
Phone : (407) 847-7466
Fax Number : (407) 847-6641

2020 AUG - 3 PM 6: 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Trademark/Service Mark Registration Caribbean Fusion

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Certificate of Registration	0
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2020

CARIBBEAN AND FLORIDIAN ASSOCIATION, INC.
LLOYD PHILLIPS
P.O. BOX 450786
KISSIMMEE, FL 34743

SUBJECT: CARIBBEAN FUSION
Ref. Number: T15000000071

We have received your document for CARIBBEAN FUSION 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 January 26, 2020. Please resubmit your filing in the form of a new mark application. We are enclosing the form and instructions for your convenience.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 320A00009783

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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

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PART I

1. **OWNER/APPLICANT:** Enter the name and address of the individual or the business entity to be listed as owner of the Trademark and/or Service Mark on the records of the Florida Department of State.

(a) Owner's/Applicant's name: Caribbean And Floridian Association, Inc.

(b) Owner's/Applicant's business address: 12467 Beacontree Way
Orlando, FL 32837
City/State/Zip

If different, Owner's/Applicant's mailing address: PO Box 450786
Kissimmee, FL 34743
City/State/Zip

(c) Owner's/Applicant's telephone number: (407) 429-5304

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 registration/document number in #1, the state or country under the laws of which the business entity is formed, organized or incorporated under in #2, and the entity's federal employer identification number (EIN) in #3.

(1) Florida registration/document number: N46379

(2) Domicile State or Country: Florida

(3) Federal Employer Identification Number: 59-3131979

2. (a) **SERVICE MARK:** 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 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.

(Note: List only those services currently being rendered by the owner/applicant. Do not include future services.)

Non-Profit Outdoor Festival/Family Fun Day with food vendors, entertainment, merchandise and service booths
to raise money for scholarships.

PART II

1. You must state the date the name, logo, design and/or slogan was first used in the state of Florida, and, used in another state or country, the date you first used the name, logo, design and/or slogan in the other country. Enter the month, day, and year the name, logo, design and/or slogan was first used by the applicant, the predecessor, or a related company in Florida. If the name, logo, design and/or slogan has been used in state or country, then you must also enter the month, day, and year the name, logo, design and/or slogan was 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: January 15, 2014

(b) Date first used in Florida: January 15, 1995

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TALLAHASSEE, FLORIDA

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 here: (NOTE: The name, logo, design and/or slogan listed in this section must match the exact name, logo and/or slogan listed on your specimens or examples.)

Caribbean Fusion

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 design 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 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 a 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)" Caribbean

_____ " APART FROM THE MARK AS SHOWN

3. ATTACH OR INCLUDE THREE SPECIMENS OR EXAMPLES OF THE TRADEMARK OR SI
MARK BEING REGISTERED

Chapter 495, F.S., requires you to submit three specimens (samples or examples) of the mark in use. Y
submit three specimens FOR EACH CLASS listed in Part I #2(d). The name, logo, design and/or sloga
specimens must be identical to the name, logo, design and/or slogan being registered. You may provi
identical specimens or three different specimens. For each service mark class (classes 35-45), you may prov
newspaper advertisements, business cards, brochures, flyers, or any combination thereof. For each tradem
(classes 1-34), you may provide three tags, labels, boxes, etc. or any combination thereof. Photographs
specimens are acceptable if the mark being registered and the good(s) or product(s) are clearly legible.

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SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:

I, Lloyd Phillips, being sworn, depose and say that I am the owner and the applicant
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 ex
related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form t
or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, to
mistake or to deceive. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have re
application and know the contents thereof and that the facts stated herein are true and correct.

Lloyd Phillips, President

Typed or printed name of applicant

Lloyd Phillips - President

Applicant's signature
(List name and title)

STATE OF FLORIDA
COUNTY OF Osceola

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this (numeric
3 day of August, 2020, by (Lloyd Phillips).

numeric date

month

year

name of person making statement

Keyla M. Gracia Vaz

Notary Public's Signature

Keyla M. Gracia Vaz

Notary Public's Printed Name

Personally Known OR Produced Identification

Type of Identification Produced: FL Driver License

FILING FEE: \$87.50 per class



CAFA-A 501(C)(3) Tax Exempt Organization

WATER
COMMISSION'S
FREE
TASTING



FOODS & BEVERAGES

BRINGING DIVERSITY INTO OSCEOLA COUNTY
BY SHOWCASING THE BEST OF CARIBBEAN
CULTURE WITH ITS FOODS, MUSIC & ARTS.

MISSISSIPPI • LAKEFRONT PARK

SEPTEMBER 2020

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