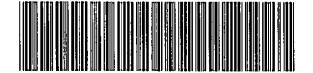
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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K. SALY AUG 15 2023

COVER LETTER

Florida Department of Childre	en and Families
SUBJECT:	(Mark to be registered)
	(Mark to be registered)
The enclosed Trademark/Service Mark App	plication, specimens and fee(s) are submitted for fili
Please return all correspondence concerning	g this matter to the following:
Joseph Edwards	
(Name of Person)	
Florida Department of Children and Famili	ies
(Firm/Company)	
2415 N. Monroe	
(Address)	
Tallahassee FL 32303	
(City/State and Zip	p Code)
For further information concerning this mate	ter, please call:
Joseph Edwards	850 717-4594
	at () (Area Code & Daytime Telephone Num

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

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

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

 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.
(a) Owner's/Applicant's name: Florida Department of Children and Families
(b) Owner's/Applicant's business address: 4515 N. Monroe Street
Tallahassee FL 32303
City/State/Zip
If different, Owner's/Applicant's mailing address:
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 Liability Company ☐ Union ☐ Other: State Agency
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:
(2) Domicile State or Country: Florida
(3) Federal Employer Identification Number: 59-3458-463
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.)
Social and healthcare services in Florida as provided by Florida Statute 20.19 and related statutes

connection with an actual product manufactured by the owner/applicant or on t is a trademark. If the mark is a trademark, the applicant/owner must list th design and/or slogan is being used to identify. For example: ladies sportswear etc. If the owner/applicant is using the name, logo, design and/or slogan to i place, enter the specific product(s) the name, logo, design and/or slogan is being	he owner/app	licant's behal	lf, the mark
(Note: List only those product(s) currently available. Do not include future p		 	
N/A	roducts.)	127	آ ن س ر د
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	-		<u> </u>
		15.7.	्रि (क्
2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURREN	ETLY USED:	5- 1	Έ
SERVICE MARKS: If the name, logo, design and/or slogan are/is being used must specify the form(s)/mean(s) of advertisement the applicant/owner is usin public. For example: newspaper advertisements, business cards, brochures, flisbeing used in connection with a type of service, state how the name, logo, advertising here:	g to advertise	the services	to the genera
Mark is used on https://www.myflfamilies.com/; business cards; advertisements; fliers; web	sites; marketing	g collateral,	
letterhead; decals; signs; and related materials required by a state agency.			
TRADEMARKS: If the name, logo, design and/or slogan are/is being used to fore the applicant/owner, you must specify how the mark is applied or affixed to example: a tag, label, imprinted or engraved on the actual product, etc. If the specific product, state how the name, logo, design and/or slogan is applied of packaging:	the actual pr	oduct or its p	ackaging. For
N/A			_
			
			
2. (d) <u>FEE(S) AND CLASS(ES)</u> : There are a total of 45 classes or categories in be categorized. The fee to register a mark is \$87.50 per class. Make check pay	n which all pr able to Florid	oducts or ser la Departmen	vices must t of State.
List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and a service (s)			
Class 45 Personal and social services rendered by others to meet the needs of individuals;	-		-
and security services for the protection of property and individuals.			
	•		

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: 5/10/2023
(a) Date first used in other state or country, if applicable: (b) Date first used in 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/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.)
A design of people figures encircled by the words "Florida Department of Children and Families". To the right of the circle.
are the words "Family Resource Center" in a sans-serif font, vertically stacked.
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)" FLORIDA "
" 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:

I, Joseph C. Edwards or that I am authorized to sign on be related company has registered this or in such near resemblance as to b mistake or to deceive. I make this a application and know the contents th	half of the owner and applicant here mark in this state or has the right to e likely, when applied to the goods o flidavit and verification on my/the a	use such mark in Florida either or services of such other person pplicant's behalf. I further ackn	dge no other person except a in the identical form thereof to cause confusion, to cause
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Joseph C. Edwards		
	Typed or printed nam	e of applicant	
	Applicant's sig (List name and		ederate of The
STATE OF FLORIDA COUNTY OF Leon			PRIO PRIO
Sworn to (or affirmed) and subscrib day of Man mumeric date (month)	ed before me by means of X phys 2023 by (ical presence or [] online nota <u>Factor ds</u>). son making statement	rization, this (numeric:date) this
	Sylvic	Notary Public's Signa	W b
	Soph	ia D Flawers-F Notary Public's Prin	10) [ight] ted Name
Personally Known M OR Produce	d Identification 🔲		
Type of Identification Produced:	•	Commiss Expires S	D. FLOWERS-HOLLIS sion # HH 174803 September 18, 2025 by Toy Fain Insurance 800-385-7018
	FILING FEE: \$87	.50 per class	





