

T23000000687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

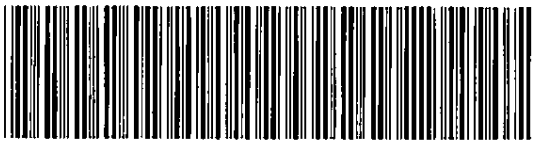
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
CANCELLATION

Office Use Only



000419221700

11/27/23--01039--005 \*\*50.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 NOV 27 PM 3: 57

FILED

K. SALY  
DEC 11 2023

11/27

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Miami River Development  
\_\_\_\_\_  
(Name of Mark to be cancelled)

The enclosed Application for the Cancellation of a Trademark and/or Service Mark and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Irving J. Diaz

\_\_\_\_\_  
(Contact Person)

Diaz Commercial, PLLC.

\_\_\_\_\_  
(Firm/Company)

2200 N. Commerce Pkwy., Ste. 200

\_\_\_\_\_  
(Address)

Weston, FL 33326

\_\_\_\_\_  
(City, State and Zip Code)

For further information concerning this matter, please call:

Irving J. Diaz

at ( 954 ) 644-8900  
\_\_\_\_\_  
(Area Code and Daytime Telephone Number)

\_\_\_\_\_  
(Name of Contact Person)

Enclosed is a check for the following amount:

\$50.00 Filing Fee

\$102.50 Filing Fee and Certified Copy

**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

APPLICATION FOR THE CANCELLATION OF A  
TRADEMARK AND/OR SERVICE MARK

Pursuant to s. 495.101, Florida Statutes, the undersigned hereby submit(s) this application to cancel the following trademark and/or service mark registration:

- 1. Mark to be cancelled: Miami River Development
- 2. Registration Number: T23000000687
- 3. Date of Registration: 06/27/2023

4. Signature of Owner(s):  
 Owner's Signature: [Signature]      Co-Owner's Signature, if any: N/A  
 Irving J. Diaz  
 Typed or Printed Name of Person Signing Above      Typed or Printed Name of Person Signing Above  
Diaz Commercial, PLLC.  
 Typed or Printed Name of Owner      Typed or Printed Name of Co-Owner

STATE OF Florida  
 COUNTY OF USA

Sworn to and subscribed by me on n this 17 day of November, 2023, Irving Jorge Diaz  
 (Name of Individual Signing)

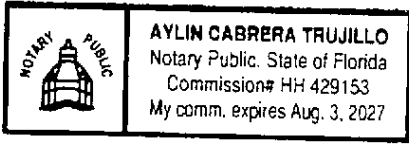
personally appeared before me,  who is/are personally known to me or  whose  
 identity (ies) I proved on the basis of DRIVER license Florida

(Seal)      [Signature]  
 Notary Public's Signature  
Aylin Cabrera Trujillo  
 Notary Public's Printed Name

My Commission Expires: 08/03/2027

(Attach additional sheet if necessary)

Filing Fee: \$50.00  
 Certified Copy (optional): \$52.50



FILED  
 2023 NOV 27 PM 3:57  
 TALLAHASSEE, FLORIDA