

LAW OFFICES OF
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Florida Department of State
Trademark Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

000001538160
-07/14/95--01062--002
*****87.50 *****87.50

Re: Service Mark Registration of Petmates, Inc. for Pet Rep

Gentlemen:

Enclosed please find a check in the amount of \$87.50, together with the service mark application for registration together with three (3) specimens in the form of business cards.

The name and address to which acknowledgment should be sent and contact person is:

Lisa Marie Stackpole
290 Sunrise Drive, Apt. 2J
Key Biscayne, Florida 33149
Tel: (305) 365-9172

Please note that this mark is presently reserved for Petmates, Inc.

Very truly yours,

STEPHEN J. BRONIS, P.A.

Stephen J. Bronis

Stephen J. Bronis, Esquire

SJB:hov
Encs.

T95-
883

Name Availability	<i>EA</i>
Document Examiner	GSH
Updater	GSH
Updater Verifier	GSH
Acknowledgement	GSH
W. P. Verifier	GSH

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Florida Department of State, Sandra B. Mortham, Secretary of State

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

Name & address to whom acknowledgment should
be sent:

LISA MARIE STACKPOLE

290 Sunrise Drive, Apt. 2J

Key Biscayne, Florida 33149

305) 365-9172
Daytime Telephone number

PART I

1. (a) Applicant's name: PETMATES, INC.

(b) Applicant's business address: 290 Sunrise Drive, Apt. 2J

Key Biscayne, Florida 33149

City/State/Zip

(c) Applicant's telephone number: (305) 365-9172

☐ Individual ☒ Corporation ☐ Joint Venture ☐ Other: _____
☐ General Partnership ☐ Limited Partnership ☐ Union

If other than an individual,

(1) Florida registration number P95000023480 (2) Domicile State: Florida

(3) Federal Employer Identification Number: 65-0571491

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:
(i.e., furniture moving services, diaper services, house painting services, etc.)

Representation of pets and animals in advertising and entertainment

industry, Pet talent agency

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

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(c) The mode or manner in which the mark is used: (i.e., labels, decals, newspaper advertisements, brochures, etc.)
Advertisements, brochures, business cards, T-Shirts, hats

(d) The class(es) in which goods or services fall:

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PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: 5/11/95 (b) Date first used in Florida: 5/11/95

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

PET REP with a small star in the middle.

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " PET

" APART FROM THE MARK AS SHOWN.

I, LISA MARIE STACKPOLE, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct.

PETMATES, INC. - Lisa Marie Stackpole, President

Typed or printed name of applicant

Lisa Marie Stackpole

Applicant's signature or authorized person's signature
(List name and title)

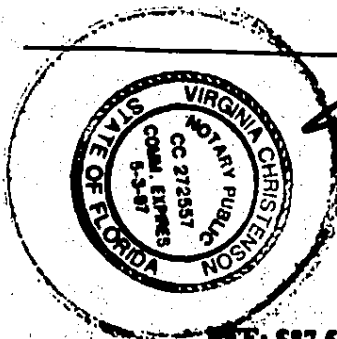
STATE OF FLORIDA

COUNTY OF DADE

On this 12th day of July, 19 95, appeared before me,

☐ who is personally known to me
☐ whose identity I proved on the basis of _____

LISA MARIE STACKPOLE personally



Seal

[Signature]
Notary Public Signature
VIRGINIA CHRISTENSEN
Notary's Printed Name

My Commission Expires: _____

FEE: \$87.50 per class

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