

T96 000 000 589

Requestor's Name	
Address	
City/State/Zip	Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. LA Belk Health Care Inc. & Design of
World (42)
(Corporation Name) (Document #)
 2. 789/304/740/671
(Corporation Name) (Document #)
 3. The "POB" Address Design of
(Corporation Name) (Document #) 200001753002
03/21/95 01079 004
*****87.50 *****87.50
 4. Telephone #, 800 #, Globe
(Corporation Name) (Document #)
fax # cannot be included as part of your reg. please
this from Part III.
- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Name	
Availability	<u>NA</u>
Document Examiner	NJC
Updater	NJC
Updater Verifier	NJC
Acknowledge	NJC
W. P. Verifier	NJC

ARTHUR D. DECKELMAN, P.A. & ASSOCIATES

Attorneys At Law

36370 U.S. HWY. 19 NO.
PALM HARBOR, FL 34684
(813) 784-4773
(813) 787-2695 FAX

Arthur D. Deckelman
FL, NY, CA
Theresa A. Sandberg
FL, NY
Andrew E. Stinnette
FL

March 18, 1996

Secretary of State
Department of Corporations
Service Mark Division
Post Office Box 6327
Tallahassee, FL 32314

Re: La Belle Healthcare, Inc.
Our File Number: 6-119-D

Dear Sir or Madam:

Enclosed please find an Application for the Registration of a Trademark or Service Mark, two Business Cards for La Belle Health Care, Inc., and a check for the filing fee in the amount of \$87.50. After filing, please forward a Certificate of Registration to this office.

Thank you for your attention to this matter.

Sincerely,

ARTHUR D. DECKELMAN, P.A.
& ASSOCIATES



Dawn A. Geibel
Legal Assistant to
Arthur D. Deckelman, Esq.

/dg

Enclosures



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 22, 1996

Jason M. Bergole
La Belle Healthcare
P.O. Box 16225
Clearwater, FL 34629

SUBJECT: LA BELLE HEALTH CARE INC. & DESIGN OF GLOBE
Ref. Number: W96000006267

We have received your document for LA BELLE HEALTH CARE INC. & DESIGN OF GLOBE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please delete any reference to the address, P.O. Box, telephone #, fax # or 800 #, as none of this can be included as part of your registration.

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following: DESIGN OF GLOBE

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6918.

Nanette Causseaux
Corporate Specialist Supervisor

Letter Number: 496A00013342

ARTHUR D. DECKELMAN, P.A. & ASSOCIATES

Attorneys At Law

36370 U.S. HWY. 19 NO.
PALM HARBOR, FL 34684
(813) 784-4773
(813) 787-2695 FAX

Arthur D. Deckelman
FL, NY, CA
Theresa A. Sandberg
FL, NY
Andrew E. Stinnette
FL

April 11, 1996

Ms. Nanette Casseaux
Corporate Specialist Supervisor
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: La Belle Health Care, Inc.
Application for Service Mark
Our File Number: 6-119-D

Dear Ms. Casseaux:

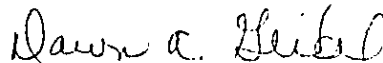
Pursuant to our telephone conversation of today, enclosed please find the corrected Service Mark Application for the above corporation, with the attached Addendum with the required disclaimer.

If you have any questions, or require any more changes, please do not hesitate to call this office.

Thank you for your attention to this matter.

Sincerely,

ARTHUR D. DECKELMAN, P.A.
& ASSOCIATES



Dawn A. Geibel
Legal Assistant to
Arthur D. Deckelman, Esq.

/dg

Enclosure



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 17, 1996

Arthur D. Deckelman, Esquire
ATTN: DAWN
36370 U.S. Hwy. 19 No.
Palm Harbor, FL 34684

SUBJECT: LA BELLE HEALTH CARE INC. & DESIGN OF GLOBE
Ref. Number: W96000006267

We have received your document for LA BELLE HEALTH CARE INC. & DESIGN OF GLOBE and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

PLEASE RETURN ORIGINAL APPLICATION, WE RECEIVED COPY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6918.

Nanette Causseaux
Corporate Specialist Supervisor

Letter Number: 696A00017905

ARTHUR D. DECKELMAN, P.A. & ASSOCIATES

Attorneys At Law

36370 U.S. HWY. 19 NO.
PALM HARBOR, FL 34684
(813) 784-4773
(813) 787-2695 FAX

Arthur D. Deckelman
FL, NY, CA
Theresa A. Sandberg
FL, NY
Andrew E. Silinette
FL

May 14, 1996

Ms. Nanette Casseaux
Corporate Specialist Supervisor
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: La Belle Health Care, Inc.
Application for Service Mark
Our File Number: 6-119-D

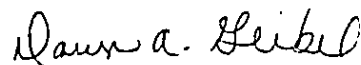
Dear Ms. Casseaux:

Enclosed please find the original corrected Service Mark Application for the above corporation, with the attached Addendum with the required disclaimer. We just received this original document back from our clients. Sorry for the delay.

If you have any questions, or require any more changes, please do not hesitate to call this office.

Sincerely,

ARTHUR D. DECKELMAN, P.A.
& ASSOCIATES



Dawn A. Geibel
Legal Assistant to
Arthur D. Deckelman, Esq.

/dg

Enclosure

Florida Department of State, Jim Smith, 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 and address to whom acknowledgement
should be sent:

La Belle Healthcare
P.O. Box 16225
Clearwater, Florida 34629
(813) 781-5206
Applicant's phone number

PART I

1. (a) Applicant's name: La Belle Healthcare, Inc.
(b) Applicant's business address: P.O. Box 16225
Clearwater, FL 34629

() individual (X) corporation of the State of FL - 66231
() general partnership () limited partnership of the State of _____

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:

Provide physical therapist (PTA), Occupational Therapist (COTA)
healthcare personnel to hospitals and physical therapy facilities.

- (b) If the mark to be registered is a trademark, the goods in connection with which the mark is used: Not applicable

- (c) The mode or manner in which the mark is used:

Cards, brochures, handouts, all forms of advertisement

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

42 Miscellaneous

PART II

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

(a) Date first used anywhere: August 25, 1995

(b) Date first used in Florida: August 25, 1995

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.)

La Belle Healthcare, Inc.; La Belle is in a hand-written type font.

In the background is a circular globe of the world that shows the United States, South America, the Atlantic Ocean, Europe and part of Africa with a light blue/aqua color for the water and a purplish color for the land. ~~also containing Post Office box number, address, telephone number, 800 number and fax number~~

2. **DISCLAIMER** (if applicable) See attached sheet.

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

" La Belle Healthcare, Inc. " APART FROM
THE MARK AS SHOWN.

I, JASON M. BERGOLE, 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.

La Belle Healthcare, Inc.

Typed or printed name of applicant

By:

Applicant's signature or authorized person's signature

(List name and title)

Jason M. Bergole, President

Subscribed and sworn to before me this 6th day of MARCH, 19 96
by Jason M. Bergole, to me known.

(Notary Seal)

Arthur V. Deckman

Signature of Notary Public

My Commission Expires:



OFFICIAL SEAL

Arthur D. Deckelman
My Commission Expires
Feb. 8, 1997
Comm. No. CC 257882

FEE: \$87.50 per class

ADDENDUM

to

Florida Department of State Application for
Registration of a Trade Mark or Service Mark

PART III, Number 2: Disclaimer

No claim is made to the exclusive right to use the World
Globe, the word, "Inc.", the city and state, "Clearwater, Florida".

RECEIVED
JAN 22 1963
TALLAHASSEE



P.O. Box 16225, Clearwater, Florida 34629
(813) 781-5206 (800) 400-7555 Fax: (813) 781-4303