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N. CAUSSEAUX

NOV 1 2011

EXAMINER

COVER LETTER

Dear Sir or Madam:
The enclosed Mark Renewal Application, specimen and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
PAUL RADICE
(Name of Person)
ANGELS HATCHERY (Firm/Company)
(Firm/Company)
16375 SW 256 STREET
(Address)
HOMESTEAD, FLORIDA 33031

STREET/COURIER ADDRESS:

(City/State and Zip Code)

For further information concerning this matter, please call:

Registration Section **Division of Corporations** Clifton Building

TÖ:

Registration Section Division of Corporations

2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

Registration Section **Division of Corporations** P.O. Box 6327

Tallahassee, Florida 32314

FILING FEE: \$87.50 per class **CERTIFICATE OF RENEWAL: \$8.75 (OPTIONAL)**

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

CR2E005 (1/11)

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:	Return To: Division of Corporations
PAUL RADICE	P.O. Box 6327
	Tallahassee, FL 30314
16375 SW 256 STREET	
HOMESTEAD, FL 33031	- Table 2 C
,	
1) Mark Registered: ANGEL	S HATCHERY
2) Registration Number: T97000	000675
3) Date Filed: 6-16-97 4.) Renewa	al Date: 6-16-12 5.) Class(es) Filed: 0042
	5.071, Florida Statues. Below you must state the mark is still in nuse is not due to any intention to abandon the mark.
	•
THE MARK MNGELS	HATCHERY IS STILL IN
USE IN THE STAT	E OF FLORIDA.
7) If the mark is still in use, a specimen show	ing actual use of the mark is included with this application.
8) If applicant is a business entity, enter the s	tate of incorporation/formation/organization:
	PAUL RADICE
	Typed or Printed Name of Owner
_, _, ^	Tack tealle
STATE OF FLOYIDA DANG	Owner's Signature or Authorized Person's Signature
COUNTY OF Mi ami Florida	
21	day of Oct 2011. Paul Rodic
Sworn to and subscribed before me on this	day of (Name of Individual Signing)
who is personally known to me whose ic	dentity I proved on the basis of
	Manager Manager and
NANCY L. KERMODE Notary Public - State of Florida	1 VOLYNUN XXXXIII VYYYVVOU
My Commission Expires Jan 7, 2012	Notary\Public's Signature
Commission # DD 739852	Manni L. Kermodo
Certificate of Renewal: \$8.75 (Optional)	Notary Public's Printed Name
CR2E005 (1/11)	

