City/State/Zip Phone #

JAN 13 PM 1: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Office Use Only

(Corporation Name)  (Corpo	(Corporation Name) (Document #)  4. (Corporation Name) (Document #)  Walk in Pick up time Certified Copy  Mail out Will wait Photocopy Certificate of Status  NEW FILINGS Profit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Other Merger  Profit Merger  REGISTRATION Other  REGISTRATION OUALIFICATION Name Reservation Reinstatement Document #)  NonProfit Profit Resignation of R.A., Officer/ Director  Name Reservation  Name Reservation  Registration Updater NJC Updater	1. Liao Bella (42) (Corporation Name) (Document #)						
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## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 30, 1997

HORACIO F. OLIVEIRA CIAO BELLA RISTORANTE 7921-23 N.W. 2 ST. MIAMI, FL 33126

SUBJECT: CIAO BELLO Ref. Number: W97000028837

We have received your document for CIAO BELLO and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Part I(2)(c) you must state how the mark is being used. If the mark is a trademark, you can cite labels, decals, tags, imprints or goods, etc. If the mark is a service mark, you can cite business cards, newspaper advertisements, TV and radio advertisements, etc.

Class(es) (42) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (42).

In Part III, you must write the exact wording of the mark. If the mark includes a logo or design, a brief written description must be provided.

Please provide this office with an English translation of your mark or a statement that the mark does not have a translation.

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 (850) 487-6918.

Letter Number: 397A00060794

Nanette Causseaux Corporate Specialist Supervisor

## APPLICATION FOR THE REGISTRATIC 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:		
	, _	CIAO BELLA RISTORANTE		
	-	7921-23 NW 25T.		
		MIAMI. FL. 33126.		
	. <u>(</u>	(305) 269.0369. Daytime Telephone number		
		PARTI		
1. <b>(a)</b>	Applicant's name: HORACIO	F. OLIVEIRA		
(b)	Applicant's business address: 7921-23	N.W. 2ST. MIAMI, FC.		
( )	33126	•		
		City/State/Zip		
	Applicant's telephone number: $(305)$			
	Individual Corporation	□ Joint Venture □ Other:		
	☐ General Partnership ☐ Limited Partnershi	p Genon		
	ner than an individual,	(2) Dominila Stata: F		
(3) Fe	Federal Employer Identification Number:	(2) Domicile State: FL.		
		e services in connection with which the mark is used:		
RESTAURANT - ITALIAN FOOD.				
(b)	) If the mark to be registered is a trademark, the g (i.e., ladies sportswear, cat food, barbecue grills,	goods in connection with which the mark is used: shoe laces, etc.)		
	ITA	ILIAN FOOD		
(c)	· X	(i.e., labels, decals, newspaper advertisements, brochures,		
<u>د</u>	HYADEMARK = DOSING	SS CARDS		

(Continued)

d) The class(es) in which goods or services fall:	
. (90)	
PART II  1. Date first used by the applicant, predecessor, or a related company (must in	clude month, day and year):
(a) Date first used anywhere:	in Florida: Same
PART III  1. The mark to be registered is: (If logo/design is included, please give brief we must be 25 words or less.)  CIAO BENO - WRITTED IN SCRIPE,	written description which
circle are the 1,00005 coo Bella (and under	wenth) Italian Rostovanit.
ARMSLAKI VON: Hello Beauty	
2. DISCLAIMER (if applicable  NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM  " APART I	I" FROM THE MARK AS SHOWN.
I, HORACIO F. OLIVEIRA, being sworn, de applicant herein, or that I am authorized to sign on behalf of the owner and applicate related company has the right to use such mark in Florida either in the identical for likely to deceive or confuse or to be mistaken therefor. I make this affidavit and ver further acknowledge that I have read the application and know the contents thereof and correct	nt herein, and no other person except a m or in such near resemblance as to be ification on mv/the applicant's behalf. I
HORACIO F. OLIVEIRA  Typed or printed name of applicant	
Applicant's signature or authorized person's sig	DUNER - SEE SEE
STATE OF (List name and title)	FEST STATES
COUNTY OF DADE	DA CO
On this Think my of <u>Secenter</u> 1997 Horace appeared before me,	F. Olivera personally
who is personally known to me whose identity I proved on the b	pasis of
Roslin K	Succore
(Seal) ROSLYN R ZUCCONE  My Commission CC511908  Expires Jan. 11, 2000	Notary Public Signature  R _ Zuccont_  Notary's Printed Name
	Ivolary's Frinted Ivanie
Ciao Bella  Italian Restaurant  y Commission Expires:  \$87.50 per class	01-11-2000
Jennifer Porciello	
7921 NW 2nd St.	
Miami, FL 33126 Tel: (305) 269-0369	