798000000761

(Re	questor's Name)	
————(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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MAY 1 - 2013 N. CAUSSEAUX

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: ASAP

(Name of Mark Registered)

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:

Kristin Jagos

(Name of Person)

Associate Staffing And Placement, Inc.

(Firm/Company)

422 South Alafaya Trail, Suite 30

(Address)

Orlando, FL 32828

(City/State and Zip Code)

For further information concerning this matter, please call:

Kristin Jagos

 $_{\rm at}$ (407)

277-2733

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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

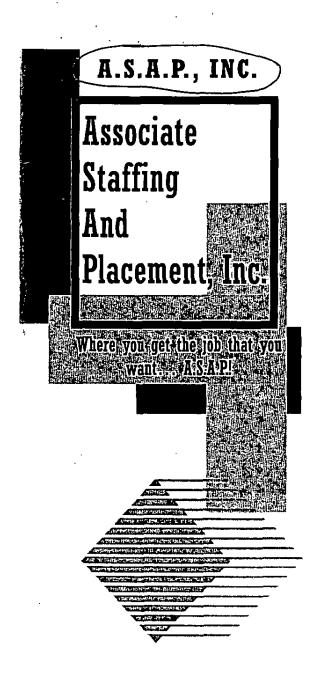
(NOTE: The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

CR2E005 (1/11)

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:	Return To: Division of Corporations:
Associate Staffing And Placement, Inc.	P.O. Box 6327 Tallahassee, FL 32314
422 S. Alafaya Trail, Suite 30	Talialiassee, PL 32314 20 37
Orlando, FL 32828	in a
Oriando, i E ozozo	AH II : 30
1) Mark Registered: ASAP	
2) Registration Number: T9800000	761
3) Date Filed: 6/20/98 4.) Renew	ral Date: 6 26 3 5.) Class(es) Filed: 0035
renewed 6/26/08 6) Renewal statement pursuant to section 49:	5.071, Florida Statues. Below you must state the mark is still in
	nuse is not due to any intention to abandon the mark.
This mark has been actively used	within the state of Florida since 1998 and we wish to
renew to continue its ac	tive use.
7) 164	
	ving actual use of the mark is included with this application.
8) If applicant is a business entity, enter the	state of incorporation/formation/organization: Florida
	Carol A. Degano
	Typed or Printed Name of Owner
	Kuntin Man
T10 10	Owner's Signature or Authorized Person's Signature
STATE OF MOTICA	9 9
COUNTY OF Drange	
Sworn to and subscribed before me on this 19	Holday of April, 2013, Kristin M. Jagos
Sworn to and subscribed before the on this	(Name of Individual Signing)
who is personally known to me whose i	identity I proved on the basis of FC DC
ANTOINETTE M. DAVIS	
* MY COMMISSION # DD 997975	Milwielte Paus
(Seal) EXPIRES: June 3, 2014 Bonded Thru Budget Notary Services	Notary Public's Signature
Fee: \$87.50 Per Class	- MIDINEHE PINU
Certificate of Renewal: \$8.75 (Optional) CR2E005 (1/11)	Notary Public's Printed Name

OFFICIAL SPECIMEN TM/SM REG.#





Tel: (407) 277-2733