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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 1, 1998

LIDIA LUKAESKO 10710 S.W. 68TH ST. MIAMI, FL 33173

SUBJECT: LUKAESKO

Ref. Number: W98000015113

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

The applicant must be a legal entity, such as an individual, firm, partnership, corporation, association, or union. You may list the applicant's fictitious name in addition to the applicant's legal name. If the applicant is a partnership, please indicate general or limited partnership in Part I(1).

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.

We need three permanent specimens. TYPED, HANDWRITTEN or PHOTOCOPIED MATERIALS ARE NOT ACCEPTABLE. We do not accept specimens which have been ALTERED or DEFACED. ANY SIZE SPECIMENS ARE ACCEPTABLE. If your mark falls under the classification of a trademark (classes 1-34), we need the labels, tags, decals, containers, boxes, wrappers or 3 LEGIBLE photographs of the goods or products with the specimen affixed. IF YOUR MARK FALLS UNDER THE CLASSIFICATION OF A SERVICE MARK (CLASSES 35-42), WE NEED SPECIMENS FROM WHICH WE CAN DETERMINE THE SERVICE(S) BEING RENDERED. We will accept magazine and-or newspaper advertisements, brochures or business cards. If business cards are submitted, we must be able to determine the services being rendered. If your mark falls under the classification of both a trade and service mark, we need specimens for both. WE WILL NOT ACCEPT LETTERHEAD STATIONERY, ENVELOPES OR INVOICES AS SPECIMENS.

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.

Nanette Causseaux



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 30, 1998

LIDIA LUKAESKO 10710 S.W. 68TH ST. MIAMI, FL 33173

SUBJECT: LUKAESKO

Ref. Number: W98000015113

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

You failed to make the correction(s) requested in our previous letter.

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.

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.

amore

HANDWRITTEN We need three permanent specimens. TYPED. PHOTOCOPIED MATERIALS ARE NOT ACCEPTABLE. We do not accept specimens which have been ALTERED or DEFACED. ANY SIZE SPECIMENS ARE ACCEPTABLE. If your mark falls under the classification of a trademark (classes 1-34), we need the labels, tags, decals, containers, boxes, wrappers or 3 LEGIBLE photographs of the goods or products with the specimen affixed. IF YOUR MARK FALLS UNDER THE CLASSIFICATION OF A SERVICE MARK (CLASSES 35-42), WE NEED SPECIMENS FROM WHICH WE CAN DETERMINE THE SERVICE(S) BEING RENDERED. We will accept magazine and-or newspaper advertisements, brochures or business cards. If business cards are submitted, we must be able to determine the services being rendered. If your mark falls under the classification of both a trade and service mark, we WE WILL NOT ACCEPT LETTERHEAD need specimens for both. STATIONERY, ENVELOPES OR INVOICES AS SPECIMENS.

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.

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK

PURSUANT TO CHAPTER 495, FLORIDA STATUTES Division of Corporations Post Office Box 6327 TO: Tallahassee, FL 32314 Name & address to whom acknowledgment should be sent: Daytime Telephone number PART I 1. (a) Applicant's name: (b) Applicant's business address: _ City/State/Zip (c) Applicant's telephone number: (305 Other: ☐ Joint Venture Corporation Individual Union ☐ Limited Partnership ☐ General Partnership If other than an individual, __(2) Domicile State: (1) Florida registration number: _ (3) Federal Employer Identification Number: _ 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.) (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.) The mode or manner in which the mark is used: (i.e., labels, decals, newspaper advertisements, brochures, etc.)

(Continued)

CR2E014(7/97)

f) The class(es) in which goods or services fall:	
PART II	and year):
1. Date first used by the applicant, predecessor, or a related company (must include month, day (a) Date first used anywhere: Mg 23 /988 (b) Date first used in Florida: My	23 1988
PART III 1. The mark to be registered is: (If logo/design is included, please give brief written description must be 25 words or less.)	which
LUKAESKO	<u></u>
2. DISCLAIMER (if applicable) NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "	
NO CLAIM IS MADE TO THE EXCESSIVE TO THE MAI	RK AS SHOWN.
I, being sworn, depose and say that I applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no considered company has the right to use such mark in Florida either in the identical form or in such near likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the further acknowledge that I have read the application and know the contents thereof and that the facts state correct	other person except a resemblance as to be applicant's behalf. I
STATE OF	TARKE
COUNTY OF	型量口
On this	personally
- The second	1
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My Commission Expires: // Duil a	vame S ZWV
TVIY CONTINUES ON TO SERVICE OF THE	DODIS ECONANDEZ

FEE: \$87.50 per class

