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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone #	f)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Name	e)
(Document Number)		
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Renewal 198-1377

06/17/13--01043--012 **96.25



'JUN 19 2013 N. CAUSSEAUX

COVER LETTER

011D .	ect. sk
SUBJI	(Name of Mark Registered)
Dear S	ir or Madam:
The en	closed Mark Renewal Application, specimen and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Managa Halinara
	Karen Holme
	(Name of Person)
	Sunkist Growers, Inc.
	(Firm/Company)
	14130 Riverside Drive
	(Address)
	Sherman Oaks, CA 91423
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
	Karen Holme at 818 379-7247
	(Name of Person) (Area Code & Daytime Telephone Number)

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

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

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

CR2E005 (1/11)

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

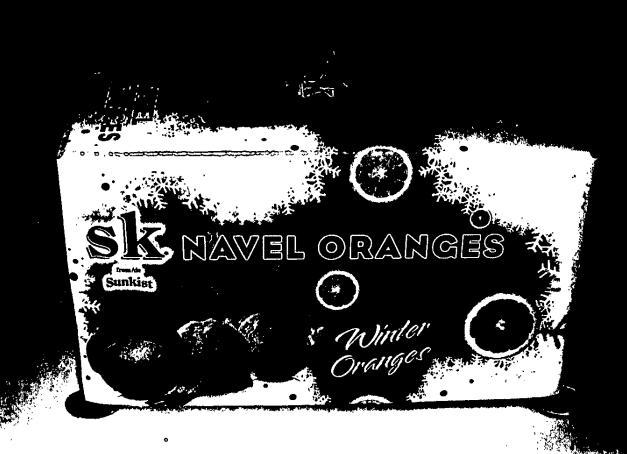
2661 Executive Center Circle

Tallahassee, Florida 32301

MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:	Return To: Division of Corporations	
Sunkist Growers, Inc. / IP Dept.	P.O. Box 6327 Tallahassee, FL 12314	
14130 Riverside Drive		
Sherman Oaks, CA 91423	Tallahassee, FL 12314	
1) Mark Registered: Sk	——————————————————————————————————————	
2) Registration Number: T9800001	377	
3) Date Filed: 11/23/98 4.) Renew		
	5.071, Florida Statues. Below you must state the mark is still in muse is not due to any intention to abandon the mark. n Florida.	
7) If the mark is still in use, a specimen show	ving actual use of the mark is included with this application.	
8) If applicant is a business entity, enter the s	state of incorporation/formation/organization: California	
	Sunkist Growers, Inc.	
Typed or Printed Name of Owner		
	Kne Holm	
STATE OF	Owner's Signature or Authorized Person's Signature	
STATE OF		
COUNTY OF		
Sworn to and subscribed before me on this	day of,,(Name of Individual Signing)	
who is personally known to me whose i	dentity L proved on the basis of	
· Letat		
(Seal) See Attached Jugat	Notary Public's Signature	
Fee: \$87.50 Per Class		
Certificate of Renewal: \$8.75 (Optional) CR2E005 (1/11)	Notary Public's Printed Name	

CALIFORNIA JURAT WITH AFFIANT STATEMENT State of California Los Angeles County of See Attached Document (Notary to cross out lines 1-6 below) ☐ See Statement Below (Lines 1–5 to be completed only by document signer[s], not Notary) Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any) Subscribed and sworn to (or affirmed) before me on this 1/th day of <u>Tune</u> (1) <u>Karen Holme</u> Name of Signer CRAIG M. TAPPA Commission # 2014767 ☐ Personally known to me Notary Public - California Proved to me on the basis of satisfactory evidence Los Angeles County to be the person who appeared before me (.) (,) Comm. Expires Apr 9, 2017 (and Name of Signer ☐ Personally known to me-☐ Proved to me on the basis of satisfactory evidence to be the person who appeared before me.) Place Notary Seal Above **OPTIONAL** Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document. Top of thumb here **Further Description of Any Attached Document** __ Number of Pages: ____ Signer(s) Other Than Named Above: _



State of Florida Department of State

I certify from the records of this office that SUNKIST GROWERS, INC. is a corporation organized under the laws of California, authorized to transact business in the State of Florida, qualified on June 3, 1952.

The document number of this corporation is 808955.

I further certify that said corporation has paid all fees due this office through December 31, 2013, that its most recent annual report was filed on June 11, 2013, and its status is active.

I further certify that said corporation has not filed a Certificate of Withdrawal.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Twelfth day of June, 2013

Secretary of State



Authentication ID: 400248836014-061213-808955

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html

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