

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** \_\_\_\_\_  
(Name of Mark to be cancelled)

The enclosed Application for the Cancellation of a Trademark and/or Service Mark and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

\_\_\_\_\_  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

\$50.00 Filing Fee

\$102.50 Filing Fee and Certified Copy

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**APPLICATION FOR THE CANCELLATION OF A  
TRADEMARK AND/OR SERVICE MARK**

Pursuant to s. 495.101, Florida Statutes, the undersigned hereby submit(s) this application to cancel the following trademark and/or service mark registration:

1. Mark to be cancelled: \_\_\_\_\_
2. Registration Number: \_\_\_\_\_
3. Date of Registration: \_\_\_\_\_
4. Signature of Owner(s):

Owner's Signature	Co-Owner's Signature, if any
Typed or Printed Name of Person Signing Above	Typed or Printed Name of Person Signing Above
Typed or Printed Name of Owner	Typed or Printed Name of Co-Owner

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

\_\_\_\_\_  
[Enter Name(s) of Person(s) Signing Above]

personally appeared before me,  who is/are personally known to me or  whose identity (ies) I proved on the basis of \_\_\_\_\_.

(Seal)	_____ Notary Public's Signature
	_____ Notary Public's Printed Name

My Commission Expires: \_\_\_\_\_

(Attach additional sheet if necessary)

Filing Fee: \$50.00  
Certified Copy (optional): \$52.50