



STATE OF ILLINOIS
TRADEMARK OR SERVICEMARK
RENEWAL APPLICATION

Complete and Return with \$5 Fee and Three Specimens

MUST BE TYPEWRITTEN OR LEGIBLY PRINTED IN BLACK INK

1. Name of registrant (**Owner of the Mark**) _____

2. Business Address _____
Street

City

State

ZIP Code

3. Is registrant a (**check one**)
- Corporation Union General Partnership Limited Liability Partnership (LLP)
- Individual Association Limited Partnership (LP) Limited Liability Company (LLC)
- Other (specify) _____

4 A. If a **Corporation, LP, LLP, or LLC**, in what state is it organized? _____

B. If an **LP or LLP**, what is the name of one of the general partners? _____

5. Registration Number _____

6. Original date of registration _____

7. The goods or services named in the registration in connection with which the mark is now being used

The applicant hereby appoints the Secretary of State of Illinois as agent for service of process in an action relating only to the renewal registration which may be issued pursuant to this application, if the renewal registrant be, or shall become, a non-resident individual, or foreign partnership, limited liability company, association, or corporation not licensed to do business in this State, or cannot be found in this State.

The undersigned hereby declares, under penalty of perjury, that the statements contained in the foregoing application for renewal are true, that said registrant is the owner of the mark, and that the mark is still in-use in the State of Illinois in the manner described in this renewal application.

X _____
Signature of Applicant

Type or Print Name of Applicant

Official Capacity

NOTE

This application for renewal must be accompanied by three specimens of the mark and by a renewal fee of \$5.00 payable to the Secretary of State. Clip specimens to the application. **DO NOT GLUE OR STAPLE.**

Specimens larger than 3" x 3" will not be accepted. If the specimens are larger than that, send facsimiles such as photostats reduced in size of the actual specimens.

Send a separate check for each renewal application. This will prevent return of multiple applications for correction.

Return to:

**Secretary of State's Office
Department of Business Services
Trademark Division
3rd Floor, Howlett Building
Springfield, Illinois 62756**

(217) 524-0400

<http://www.cyberdriveillinois.com>