



# State of California Secretary of State

## APPLICATION TO REGISTER LAUNDRY SUPPLY DESIGNATION

Pursuant to Business and Professions Code section 14482

**IMPORTANT – Read instructions before completing this form.**

1. REGISTRANT NAME				
2. BUSINESS ADDRESS				
CITY	STATE	ZIP CODE		
<p>3. BUSINESS STRUCTURE (Check One)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none; vertical-align: top;"> <input type="checkbox"/> CORPORATION (State of Incorporation) _____   <input type="checkbox"/> LIMITED LIABILITY COMPANY (State of Organization) _____   <input type="checkbox"/> LIMITED PARTNERSHIP (State of Organization) _____   <input type="checkbox"/> GENERAL PARTNERSHIP (State of Organization) _____         </td> <td style="width: 50%; border: none; vertical-align: top;"> <input type="checkbox"/> SOLE PROPRIETOR   <input type="checkbox"/> SPOUSES, AS COMMUNITY PROPERTY   <input type="checkbox"/> DOMESTIC PARTNERS, AS COMMUNITY PROPERTY   <input type="checkbox"/> OTHER (Describe) _____         </td> </tr> </table>			<input type="checkbox"/> CORPORATION (State of Incorporation) _____  <input type="checkbox"/> LIMITED LIABILITY COMPANY (State of Organization) _____  <input type="checkbox"/> LIMITED PARTNERSHIP (State of Organization) _____  <input type="checkbox"/> GENERAL PARTNERSHIP (State of Organization) _____	<input type="checkbox"/> SOLE PROPRIETOR  <input type="checkbox"/> SPOUSES, AS COMMUNITY PROPERTY  <input type="checkbox"/> DOMESTIC PARTNERS, AS COMMUNITY PROPERTY  <input type="checkbox"/> OTHER (Describe) _____
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4. LIST NAMES OF PARTNERS, IF REGISTRANT IS A LIMITED OR GENERAL PARTNERSHIP	5. LIST NAMES OF MEMBER(S) OR MANAGER(S), IF REGISTRANT IS A LIMITED LIABILITY COMPANY			
6. DESCRIPTION OF NAMES, MARKS OR DEVICES (DESIGNS) USED AS LAUNDRY SUPPLY DESIGNATIONS				
7. NAME OF CORPORATION, LIMITED LIABILITY COMPANY, OR LIMITED OR GENERAL PARTNERSHIP (If Applicable)				
<p>8. SIGNATURE:</p> <p>_____</p> <p>DATE</p> <p>_____</p> <p>SIGNATURE OF AUTHORIZED PERSON</p> <p>_____</p> <p>TYPE OR PRINT NAME AND TITLE</p>				
<p>9. RETURN ACKNOWLEDGMENT TO: (Type or Print)</p> <p>NAME [ ]</p> <p>ADDRESS</p> <p>CITY/STATE/ZIP [ ]</p>		<p>THIS SPACE FOR FILING OFFICER USE LINEN MARK</p> <p>CERT. NO. _____</p>		

**INSTRUCTIONS FOR COMPLETING  
APPLICATION TO REGISTER  
LAUNDRY SUPPLY DESIGNATION**

Type or print in blue or black ink. Mail your application with original signature and \$10.00 filing fee to the Secretary of State, Trademark Unit, P.O. Box 942877, Sacramento, CA 94277-0001.

- Item 1.** Enter the complete name of the registrant.
- Item 2.** Enter the complete business address of the registrant.
- Item 3.** Identify the business structure of the registrant by checking the appropriate box. If a corporation, limited liability company, limited partnership or general partnership, please list the state of origination.
- Item 4.** Enter the names of the general partners, if registrant is a limited or general partnership. Attach additional pages, if necessary.
- Item 5.** Enter the names of the members or managers, if registrant is a limited liability company. Attach additional pages, if necessary.
- Item 6.** Enter the names, marks or devices (designs) used as laundry supply designations.
- Item 7.** Enter the name of the corporation, limited liability company, or limited or general partnership (if applicable).
- Item 8.** Date, sign, and print the name of the authorized person signing the application. If the registrant is a corporation, limited liability company, or limited or general partnership, please list the title of the person signing the application on behalf of the entity.
- Item 9.** Enter the name and address of the person or firm to receive the acknowledgment of the filing.