

STATE OF MONTANA

RENEWAL of MARK APPLICATION
30-13-313, MCA



MAIL: LINDA McCULLOCH
Secretary of State
P.O. Box 202801
Helena, MT 59620-2801
PHONE: (406)444-3665
FAX: (406)444-3976
WEB SITE: sos.mt.gov

Prepare, sign & submit with the proper filing fee.
This is the minimum information required.

(This space for use by the Secretary of State only.)

Required Filing Fee: \$20.00 per class number
[] 24 Hour Priority Handling check box & Add \$20.00
[] 1 Hour Expedite Handling check box & Add \$100.00

For the purpose of renewing a mark registration with the State of Montana, the undersigned submits the following statements of fact to the Secretary of State.

1. The mark to be renewed is:

Note: Must be identical to the mark as currently registered with the Montana Secretary of State's office.

2. Current Registration Number with the Montana Secretary of State is: _____

3. Attached is a facsimile, a specimen or drawing of the mark. (Required for all renewals whether it includes a design or is words only.)

4. Class Numbers: _____ of service or goods.
PLEASE NOTE: If the original trademark registration was filed before July 1, 2003, the class number must be changed to agree with the new Class of Goods and Services. The list of new Class of Goods & Services can be viewed on line. If the original trademark registration was filed after July 1, 2003, the class number(s) must be identical to the class(es) originally registered. An additional renewal fee must be submitted for each class if you are renewing more than one class for this mark.

5. The name and business mailing address of each applicant is as follows:

6. The applicant states, under penalty of perjury, that the applicant is the owner of the mark, and that the mark has been and is still in use.

Signature

Date

Title

Must be signed by the applicant which may be a member of the firm or limited liability company or an officer of the corporation or association applying for the trademark registration.

Contact Information: Phone _____ Email _____

GENERAL INSTRUCTIONS

Please type or print clearly when filling out this form.

ALL INFORMATION PUBLIC

All information provided, including names and addresses of the principals of the entity, will be made available on the Secretary of State's web site or upon request.

LEGAL AND ACCOUNTING IMPLICATIONS

There are important legal and accounting implications with respect to this entity's actions. Suitable legal and accounting advice should be secured before submission. The Secretary of State's office suggests that such advice be sought prior to filling out forms to be sure that you understand the terms and procedures.

FORM PROCESSING TIME

Please be advised that the Business Services Division of the Montana Secretary of State will process your business documents within 10 working days of receipt.

- During this period if it is determined that your document does not meet statutory requirements, a letter outlining the deficiencies will be returned to the original submitter.
- If the document is complete and correct, the document will be filed and a letter certifying the filing of the document will be returned to the original submitter.
- If you wish a "FILED STAMPED" copy of the document to be returned with the certification letter (at no additional fee), it will be necessary for you to submit the original and a copy of the document.

Express Handling

- You may request 24 hour priority handling of your document by simply marking the "24 hour priority handling" box and include an **additional** \$20.00 with your handling fee.
- You may request 1 hour expedite handling of your document by marking the "1 hour priority handling" box and include an **additional** \$100.00 with your filing fee.
- **Please note:** If your documents are returned for deficiencies and upon resubmittal you request either of the Express Services **you must also remit** a new priority (\$20.00) or expedite (\$100.00) handling fee.

SUBMISSION

Make checks payable to the Secretary of State. Upon completion, mail with ORIGINAL SIGNATURE to:

Secretary of State
PO Box 202801
Helena, MT 59620-2801

CONTACT US

If you have any questions regarding this form, please contact the Secretary of State, Business Services Division at (406) 444-3665.

DO NOT STAPLE PAYMENT TO FILING FORM