



FORM T-5

Nonrefundable Filing Fee: \$10.00

## State of Hawaii Department of Commerce and Consumer Affairs Business Registration Division

335 Merchant Street, Room 201 Mailing Address: P.O. Box 40, Honolulu, HI 96810 Phone: (808) 586-2727

Fax: (808) 586-2733 Email: breg@dcca.hawaii.gov BusinessRegistrations.com

## TRADEMARK OR SERVICE MARK REGISTRANT NAME CHANGE

(Section 482-26, Hawaii Revised Statutes)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. Attachments to this form may be used, if necessary.

the registrant of the trademark or service mark is an unregistered hanging a trademark or service mark registrant's name under the	entity or an individual. The undersigned, for the purpose of laws of the State of Hawaii, do hereby execute this form:	
1a. The mark is a (select one):  Trademark  State the exact mark:		
1b. File Number:		
1c. Certificate Number:		
1d. Classification number:		
2a. The present name of the registrant before the change is (select one):		
An Entity Entity Name	An Individual First Name	
State, Province, or Country of Formation/Incorporation/Organization	Last Name	
File Number (if the entity is registered in Hawaii)		
2b. The entity registrant is a/an (select one):  ☐ Corporation ☐ Partnership ☐ Limited Liability Company	☐ Limited Liability Partnership ☐ Unincorporated Association	
Other (explain):		

3.	The new name of the registrant is (select one):	
	☐ An Entity	
	Entity Name	
	☐ An Individual	
	First Name	
	Last Name	
4.	The effective date of the registrant's name change is	s:
		(MM/DD/YYYY)
I certif	ify under the penalties set forth in Section 482-51, Hawaii	Revised Statutes, that (select one):
□la	am the applicant OR 🔲 I am the	of the entity applicant
(Office Held)		
of the registrant named in the foregoing application, that I am authorized to sign this form, and that the above statements are true and correct to the best of my knowledge and belief.		
Signe	ed this, day of,,	_i.
Type/Pr	Print Name	Signature
Application must be signed by the regisgrant. See instructions on next page.		
(DEPARTMENTAL USE ONLY)		
CERTIFICATE OF REGISTRATION		
Certif	ficate of Registration No.	is hereby registered under the newly named registrant
effect	tive	
511000		STATE OF HAWAII
		DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
		Dated:
		(Director of Commerce and Consumer Affairs)



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Website: BusinessRegistrations.com

## INSTRUCTIONS AND INFORMATION FOR PREPARING AND FILING A TRADEMARK OR SERVICE MARK REGISTRANT NAME CHANGE

Section 482, Hawaii Revised Statutes (HRS)

The Trademark or Service Mark Registrant Name Change must be typewritten or printed in **black ink** and must be **legible**. Attachments may be used, if necessary, and must be typed or printed in **black ink** on 8.5" x 11" white bond paper, single-sided.

The Registrant Name Change must be signed by the registrant. If the registrant is a **corporation**, the name change must be signed by an authorized officer of the corporation; for a **partnership**, by a general partner; and for a **limited liability company**, by a manager of a manager-managed company or by a member of a member-managed company; for a foreign limited liability company, by a person who is authorized or required to sign a record under the laws of its jurisdiction of organization. The signature must be in **black ink**. Submit registrant name change together with the appropriate fee(s).

- Item 1. 1a. Select one of the boxes to indicate whether the registrant's name change is being made for a trademark or service mark and state the exact mark.
  - 1b. State the file number of the mark with suffix ending "ZZ". The registrant of the trademark or service mark is an unregistered entity or an individual.
  - 1c. State the certificate number of the mark.
  - 1d. State the classification number of the mark.
- Item 2. 2a. Indicate whether the name of the registrant is an entity or an individual. If the registrant is an entity, state the present entity name, and state, province, or country of formation, incorporation, or organization and if the entity is registered in Hawaii, provide the file number. If the registrant is an individual, state the present individual's first name and last name.
  - 2b. If the registrant is an entity, indicate whether the registrant is a corporation, a partnership, a limited liability company, a limited liability partnership, an unincorporated association, or "other." If "other" is indicated, please provide an explanation.
- Item 3. Indicate whether the new name of the registrant is an entity or an individual.

If the registrant is an entity, state the new entity name.

If the registrant is an individual, state the new individual's first name and last name.

Item 4. State the effective date of registrant name change.

Filing Fees: The fee for filing a Trademark or Service Mark Registrant Name Change is \$10.00 and is not refundable.

Optional: the fee for one certified copy is \$10.00; the fee for expedited review is \$20.00. Payments made by cash, check, or credit card are accepted. Make checks payable to DEPARTMENT OF COMMERCE AND

CONSUMER AFFAIRS. Dishonored Check Fee is \$25.00.

For any questions, call (808) 586-2727 or email <a href="mailto:breg@dcca.hawaii.gov">breg@dcca.hawaii.gov</a>.

NOTICE: THIS MATERIAL CAN BE MADE AVAILABLE FOR INDIVIDUALS WITH SPECIAL NEEDS. PLEASE CALL THE BUSINESS REGISTRATION DIVISION SECRETARY AT (808) 586-2744 TO SUBMIT YOUR REQUEST.