

## Protect Your Brand from Association with XXX Domains Sunrise B Form

(Please complete one form for each Trademark to be registered)

Your Company's Name*:					
			City*:	State*:	Zip Code*:
			Phone*:	Fax*:	Email*:
Trademark (N	Mark) Name*:				
	exactly. Please contact us if your I	name must match your registered Mark Mark has non standard characters, numeric Marks involve a more complicated request			
	e Using the Mark om or Mark.org)( <i>if applicable</i> ):				
Trademark R	egistration Number*:				
Country of Re	egistration*:	<u>-</u>			
Trademark A	pplication Date ( <i>if known</i> ):	Trademark Registration Date*:			
Registered M	lark Class (if known):	·			
Trademark O	wnership (owner or assignee)( <i>if kno</i>	own):			
*Indi	cates a required field.				
1. Fill ou 2. Save steffa By providing t Request. This	the form to your computer, fill out t ns@butzel.com. he above information, you agree to p fee includes the \$200 filing fee and doe	e B Form, please either: ited form and fax to 313.225.7080 (attn: Ben Steffans); or he form and email the completed form to Ben Steffans at ay \$350 per Mark for Butzel Long to process your Sunrise B s not apply if your Request involves a Mark with non standard does not cover any follow-up interaction relating to your			
Your signatur	re				
Date:	, 2011				