



APPLICATION TO RENEW A  
TRADEMARK/SERVICE MARK REGISTRATION  
STATE OF NEW MEXICO

This form may only be used by a registrant of a trademark/service mark who seeks to renew a registration. If the mark has been changed or if the kind of goods or services is expanded from that set forth in the original registration application, you must submit a new Application for Registration. Complete all items on the application. The application must be signed by an individual applicant, general partner, or officer of a corporation or an association. You must include a specimen showing actual use of the mark on or in connection with goods or services.

1. Name of trademark/service mark: \_\_\_\_\_.
2. File number of trademark/service mark: \_\_\_\_\_.
3. Name of registrant: \_\_\_\_\_.
4. Business Address: \_\_\_\_\_.
5. If applicant is a corporation or limited liability company, enter state of incorporation: \_\_\_\_\_.
6. If applicant is a partnership, enter the state in which partnership is organized and the full and complete names of the general partners: \_\_\_\_\_  
\_\_\_\_\_.
7. State the manner in which the mark will be used on or in connection with goods or services (i.e. on foods, on labels or tags, on displays, on signs or letterheads, in advertising materials, on business cards, etc.): \_\_\_\_\_  
\_\_\_\_\_.
8. Month, day, year of first use of trademark/service mark anywhere : \_\_\_\_\_  
*MUST BE IN USE PRIOR TO REGISTRATION*
9. Month, day, year of first use of trademark/service mark in New Mexico: \_\_\_\_\_  
*MUST BE IN USE PRIOR TO REGISTRATION*
10. Class code(s) in which particular goods or services fall: \_\_\_\_\_.
11. Describe the kind(s) of goods or services in each class which the trademark/service mark is used to identify: \_\_\_\_\_  
\_\_\_\_\_.
12. Contact person and mailing address, if different from above: \_\_\_\_\_  
\_\_\_\_\_.

I hereby swear or affirm under penalty of perjury that the information provided is true, correct and complete and further that the trademark/service mark identified above has been used and is still in use in the State of New Mexico.

By: N \_\_\_\_\_  
*Applicant Signature Title Date*

By: \_\_\_\_\_ ( ) \_\_\_\_\_  
*Please Print Applicant's Full Name Phone Number*

**Submit application, specimen and \$25.00 renewal fee to:**  
**Office of the Secretary of State**  
**325 Don Gaspar, Suite 301**  
**Santa Fe, New Mexico 87503**