


FORM TM- A
The Trade Marks Act, 1999
Application For Registration Of a Trademark

On application to register a trade mark for a specification of goods or services included in one class [section 18(1)]

Temp. Ref. No: 8094571

NATURE OF APPLICATION:	OF A TRADE MARKS APPLICATION
APPLICATION AS:	FILED Others
FEE:	9000
APPLICANT	
Applicant No.	1
Name	ANVKA HEALTHCARE PRIVATE LIMITED
Address	UNIT 409B,3RD FLOOR, JK HOUSE, PLOT NO 32, ROAD NO 34,PUSA ROAD, WEA KAROL BAGH,CENTRAL DELHI, DELHI,INDIA-110005
Country	India
Jurisdiction	DELHI
Address for Service	G-179, PANDAV NAGAR, MEERUT
Mobile No.	9911576476
Email Address	anvkahealthcare@gmail.com
Nature of Applicant	Body Incorporate
Legal Status	PRIVATE LIMITED COMPANY
APPLICANT'S AGENT (If Any):	
Name	ITISHA JAIN
Address	G-179, PANDAV NAGAR, MEERUT
Nature of Agent	Advocate
Registration No.	03612
MARK DETAILS	
Category of Mark	DEVICE
Trade Mark	LINTEX
Image Description	Logo describes LINTEX in a unique written style in blue & red colour with captions UNIFORMS & MEDICAL WEAR in white
<p>Trademark Image:</p> 	
IF MARK IN A LANGUAGE OTHER THAN HINDI OR ENGLISH	

Language	English
CONDITIONS OR LIMITATIONS TO USE THE TRADEMARK, IF ANY	
CLASS OF GOODS OR SERVICE	
Class: 25	Description: CLOTHING (UNIFORM & MEDICAL WEAR), FOOTWEAR, HEADGEAR
STATEMENT AS TO USE OF MARK	Proposed to be used
ANY OTHER IMPORTANT INFORMATION OR STATEMENT	
Logo describes LINTEX in a unique written style in blue & red colour with caption UNIFORMS & MEDICAL WEAR in white colour in red box on white background	
VERIFICATION	<i>I hereby verify that above mentioned facts are true to best of my knowledge and belief.</i>
Date	05-01-2023 05:42 PM

Digitally Signed By
ITISHA JAIN

for ITISHA JAIN

Attachment Detail

[Authorization Document \(POA\)](#).