Filing Fee: \$50.00



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

2014 JUN -3 PH 2: LO

## FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1.	The legal name of the applicant business corporate Calaba'a INC	tion, limited liability company or limited partnership is:
2.	The fictitious business name to be used is	Antonie's Caffe
3.	The state or territory under the laws of which it is in	ncorporated, organized or formed isR
4.	The date of incorporation, organization or formatio	on is 6-3-2014
5.		ered office within Rhode Island is 23 stam St
6.	If a business corporation, the business in which it i	is engaged <u>Cafe</u>
7.	Applicant is otherwise authorized to do business in	n the state of Rhode Island.
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Dat	te: <u>6-3-14</u>	Calabria INC  Name of Applicant Corporation, Limited Liability Company or Limited Partnership
	FILED	By Signature of Authorized Officer of the Corporation
	JUN 03 2014 By 205524 A. A. 2:40 p.m.	BySignature of Authorized Person for the Limited Liability Company
	H. H. Q. 1.	BySignature of Authorized Person for the Limited Partnership

Form No. 624 Revised: 12/05