Filing Fee: \$50.00

ID Number: 1104



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

FICTITIOUS BUSINESS NAME STATEMENT

(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-1.1-7.1, 7-16-9 or 7-13-2 of the General Laws, 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 corporation	tion, limited liability company or limited partnership is:
2.	The fictitious business name to be used is	SNOREAS RESTAURANT
3.	The state or territory under the laws of which it is in	incorporated, organized or formed is $STATE$ OF $R \cdot I$.
4.	The date of incorporation, organization or formation	on is
5.	If a business corporation, the address of its register	ered office within Rhode Island is <u>A NPRE の 例iTR</u> モビリ
6.	If a business corporation, the business in which it is	is engaged Restaurant Business
7. Applicant is otherwise authorized to do business in the state of Rhode Island.		
Under penalty of perjury, I declare that the information contained herein is true and correct.		
Date: 7/30/99		ANDREW MITRELIS
Name of Applicant Corporation, Limited Liability Company or Limited Partnership FILED		
	JUL 3 0 1999 By CC++2/3354/	By Andrew Mikely, Pres. Signature of Officer for the Corporation Title
		By Signature of Authorized Person for the Limited Liability Company
	SC, U, SC P CO	<u>or</u>
	ervie i de	Signature of Authorized Person for the Limited Partnership