ID Number: 1/5909



Form No. 624 3/13036 Revised 01/99 RI016 - 11/22/99 CT System Online

## 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, limited liability company or limited partnership is:  The Virtus Group, Insurance and Financial Services, Inc.	
2.	The fictitious business name to be used is The Virtus Group, Inc.	
3.	The state or territory under the laws of which it is incorporated, organized or formed is Rhode Island	
4.	The date of incorporation, organization or formation is 1/01/01	
5.	If a business corporation, the address of its registered office within Rhode Island is	
	HASLAW, LLC, 1500 Fleet Center, Providence, Rhode Island 02903	
6.	If a business corporation, the business in which it is engaged <u>insurance and financial services to the public</u>	
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.	
Dat	te: January 9, 2001  THE VIRTUS GROUP, INSURANCE AND FINANCIAL SERVICES.  Name of Applicant Corporation, Limited Liability Company or Limited  Partnership	INC.
	JAN 0 9 2001  Signature of Officer for the Corporation Kenneth C. Trinque, President  or	
	ByBy	
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	By Signature of Authorized Person for the Limited Partnership	