Filing Fee: \$50.00

ID Number: 398

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## 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:	
2.	The fictitious business name to be used is SPUMONI'S RESTAURANT OF	
3.	The state or territory under the laws of which it is incorporated, organized or formed is $\frac{R}{R}$	
4.	The date of incorporation, organization or formation is	
5.	If a business corporation, the address of its registered office within Rhode Island is 1537 Neuropar	
6.	$O \leftarrow A$	<del></del>
7.	Applicant is otherwise authorized to do business in the state of Rhode Island.	
	Under penalty of perjury, I declare that the information conherein is true and correct.	ontained
Date	Date: 9-39 (cr)  Name of Applicant Corporation, Limited Liability Company or Limited Par	tnership
	By <u>Orange Alandy</u> RC Signature of Officer for the Corporation Title	ン( - ツ  e
	SEP 2 1 1999  By Signature of Authorized Person for the Limited Liability Co	
	By	