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(Requestor's Name)

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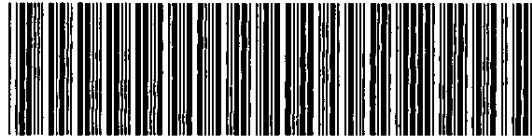
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TALLAHASSEE FLORIDA

NJC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QUATTRO GASTRONOMIA ITALIANA

(Mark to be registered)

The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Allison K. Hift, Esq.

(Name of Person)

Bilzin Sumberg Baena Price & Axelrod LLP

(Firm/Company)

200 S. Biscayne Boulevard, Suite 2500

(Address)

Miami, Florida 33131-5340

(City/State Zip Code)

For further information concerning this matter, please call:

Allison K. Hift, Esq.

(Name of Person)

(305) 350-7217

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(NOTE: The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK
PURSUANT TO CHAPTER 493, FLORIDA STATUTES

TO: **Division of Corporations**
Post Office Box 6327
Tallahassee, FL 32314

PART I

1. (a) Applicant's name: KNR Restaurant Group, LLC

(b) Applicant's business address: 1691 Michigan Avenue, Suite 325
Miami Beach, Florida 33139-2557
City/State/Zip

If different, Applicant's mailing address: _____

City/State/Zip

(c) Applicant's telephone number: (305) 695-0288
 Individual Corporation Joint Venture Limited Liability Company
 General Partnership Limited Partnership Union Other: _____

If other than an individual,

(1) Florida registration/document number: L05000006690 (2) Domicile State: FL

(3) Federal Employer Identification Number: 202215531

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:
(i.e., furniture moving services, diaper services, house painting services, etc.)

restaurant services

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used: (i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

(c) The specific way the mark is applied to the good(s) or used in advertising: (i.e., labels, decals, newspaper advertisements, brochures, etc.)

menus, brochures, signs, sweetener packets

(d) The class(es) in which goods or services fall:

Class 43

PART II

- 1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):
- (a) Date first used anywhere: August 2, 2006 (b) Date first used in Florida: August 2, 2006

PART III

- 1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

QUATTRO GASTRONOMIA ITALIANA

English Translation four Italian food shop

- 2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "GASTRONOMIA ITALIANA" APART FROM THE MARK AS SHOWN.

I, Allison K. Hift, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and to the best of my knowledge no other person except a related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, to cause mistake or to deceive. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct.

Allison K. Hift, Esq., attorney for KNR Restaurant Group, LLC

Typed or printed name of applicant

Allison K. Hift, Esq., attorney for KNR Restaurant Group, LLC
Applicant's signature
(List name and title)

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

On this 9th day of April, 2007, Allison K. Hift personally appeared before me, who is personally known to me whose identity I proved on the basis of _____

Jeanmaire Hayes
Notary Public Signature

Jeanmaire Hayes
Notary's Printed Name

My Commission Expires: March 31, 2008

(Seal)



FILING FEE: \$87.50 per class

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TALLAHASSEE FLORIDA

QUATTRO
GASTRONOMIA ITALIANA



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