

10-07-1999



101163590

To the Honorable C.

the attached original documents or copy thereof.

1. Name of conveying party(ies):
Champps Entertainment, Inc.

Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State - Minnesota
 Other _____

Additional name(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies)

Name: Champps Operating Corporation

Internal Address: One Corporate Place

Street Address: 55 Ferncroft Road

City: Danvers State: MA ZIP: 01923-4002

3. Nature of conveyance: MD 10-4-99

Assignment Merger
 Security Agreement Change of Name
 Other _____

Execution Date: 7/27/99

Individual(s) citizenship _____
 Association _____
 General Partnership _____
 Limited Partnership _____
 Corporation-State Minnesota
 Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
 (Designations must be a separate document from assignment)
 Additional name(s) & address(es) attached? Yes No

4. Application number(s) or patent number(s): _____

A. Trademark Application No.(s) _____

Additional numbers attached? Yes No

B. Trademark Registration No.(s)
See attached list

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Richard L. Schwartz

Internal Address: Akin, Gump, Strauss, Hauer & Feld, L.L.P.

Street Address: P.O. Box 688

City: Dallas State: TX ZIP: 75313-0688

6. Total number of applications and registrations involved: eight (8)

7. Total fee (37 CFR 3.41) \$215.00

Enclosed
 Authorized to be charged to deposit account

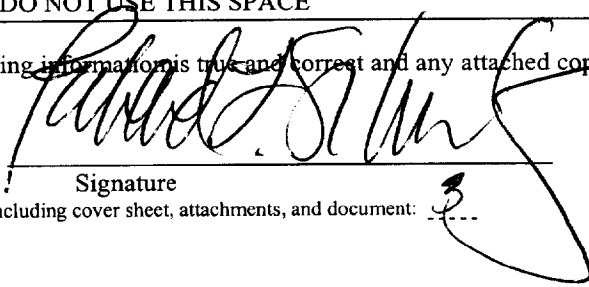
8. Deposit account number: _____

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.
 To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Richard L. Schwartz
 Name of Person Signing


 Signature

09/29/99
 Date

Total number of pages including cover sheet, attachments, and document: 3

10/05/1999 MTHAI1 00000264 1165030

01 FC:481 40.00 DP
02 FC:482 175.00 DP

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

**LIST OF MARKS RE CHANGE OF NAME OF CHAMPPS ENTERTAINMENT, INC.
TO CHAMPPS OPERATING CORPORATION (Minnesota)**

<u>MARK</u>	<u>REGISTRATION NO.</u>
CHAMP'S	1,165,030
CHAMP'S & Design	1,191,885
CHAMPPS	1,936,515
CHAMPPS	2,079,548
CHAMPPS	2,208,732
CHAMPPS AMERICANA	1,934,801
CHAMPPS AMERICANA	2,053,083
CHAMPPS AMERICANA	1,880,959



MINNESOTA SECRETARY OF STATE

AMENDMENT OF ARTICLES OF INCORPORATION

CC-248

555.

READ INSTRUCTIONS LISTED BELOW, BEFORE COMPLETING THIS FORM.

- 1. Type or print in black ink.
- 2. There is a \$35.00 fee payable to the Secretary of State for filing this "Amendment of Articles of Incorporation".
- 3. Return Completed Amendment Form and Fee to the address listed on the bottom of the form.

CORPORATE NAME: (List the name of the company prior to any desired name change)

Champps Entertainment, Inc.

This amendment is effective on the day it is filed with the Secretary of State, unless you indicate another date, no later than 30 days after filing with the Secretary of State.

The following amendment(s) to articles regulating the above corporation were adopted: (Insert full text of newly amended article(s) indicating which article(s) is (are) being amended or added.) If the full text of the amendment will not fit in the space provided, attach additional numbered pages. (Total number of pages including this form 1.)

ARTICLE I

The following provision is to be deleted:

1.1 The name of the corporation is Champps Entertainment, Inc.

and will be replaced by:

1.1 The name of the corporation is Champps Operating Corporation

m

This amendment has been approved pursuant to Minnesota Statutes chapter 302A or 317A. I certify that I am authorized to execute this amendment and I further certify that I understand that by signing this amendment, I am subject to the penalties of perjury as set forth in section 609.48 as if I had signed this amendment under oath.

[Handwritten Signature]
(Signature of Authorized Person)

Name and telephone number of contact person: Matthew DiPentima (617) 570-1772
Please print legibly

All of the information on this form is public and required in order to process this filing. Failure to provide the requested information will prevent the Office from approving or further processing this filing.

If you have any questions please contact the Secretary of State's office at (651)296-2805

RETURN TO: Secretary of State
180 State Office Bldg., 100 Constitution Ave.
St. Paul, MN 55155-1299, (651)296-2803

08921340 Rev. 10/98

MN009 -4/9/99 CT System Online

022322

STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED

OCT 27 1999

[Handwritten Signature]

Secretary of State
TRADEMARK

m

RECORDED: 10/04/1999

REEL: 001970 FRAME: 0577