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BUSINESS NAME

CERTIFICATE OF PARTNERSHIP

STATE OF INDIANA

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This Certifies, That the undersigned, JAMES T. PAVOS conducting and transacting business at HAMMOND, in the County of LAKE and State of Indiana, under the name and style of JAMES T. PAVOS ASSOCIATES that the office thereof located at Suite 200, 146 STATE ST. in the State of INDIANA and that the name and residence of each and every person engaged in said business or having an interest therein are as follows, to wit:

NAME: JAMES T. PAVOS RESIDENCE: 146 STATE ST., HAMMOND, IND.



STATE OF INDIANA
COUNTY OF LAKE
FILED FOR RECORD
FEB 13 2 04 PM '70
ANDREW J. HIGGINS
RECORDER

WITNESS hand and seal this 13 day of FEB 19 70
James J. [Signature] (Seal)
(Seal)
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THIS INSTRUMENT PREPARED BY [Signature]