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Bank One Acralis
1064 10124
Meraki 46411

CERTIFICATE OF PERSONS
OPERATING UNDER ASSUMED NAME

STATE OF INDIANA)
(SS:
COUNTY OF Lake)

THIS CERTIFIES that the Undersigned is conducting and
transacting business under the name of CIRCLE S TRUCKING

that the principal office thereof is located at _____
13401 Bell St., Cedar Lake, IN 46303

and that the name and residence of each and every person engaged in
said business or having an interest therein is as follows, to-wit:

David L. Snodgrass
13401 Bell St.
Cedar Lake, IN 46303

STATE OF INDIANA
HUGHES COUNTY
CLERK OF SUPERIOR COURT
CPD/ENR FOR RECORD/CLERK
46307
Dec 29 11 40 AM '88

WITNESS my/our hand(s) and seal(s) this 23rd day of December
19 88.

David L. Snodgrass
David L. Snodgrass

STATE OF INDIANA)
(SS:
COUNTY OF Lake)

Before me, a Notary Public in and for said County and State, on
this 23 day of Dec, 19 88, personally appeared
David L. Snodgrass

WITNESS my hand and official seal.

My Commission Expires:
2.25.92
Resident of Lake County

Sherry King
Notary Public

This Instrument Prepared By: David L. Snodgrass

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