



CERTIFICATE OF ASSUMED BUSINESS NAME

State Form 30353 (R 5 / 11-88)

Approved by State Board of Accounts 1988

Provided by: JOSEPH HOGSETT

Secretary of State of Indiana

155 State House

Indianapolis, Indiana 46204

(317) 232-6576

52025806

INSTRUCTIONS: (CORPORATIONS ONLY)

This certificate must first be recorded in the office of County Recorder of each county in which a place of business or office is located. A copy of the certificate, certified by the County Recorder, must be filed with the Secretary of State. Indiana Code 23-15-1-1

Fee for filing with the Secretary of State: \$30.00, For-Profit Corporations or \$26.00, Not-For-Profit Corporations. A certificate Issued by the Secretary of State is an additional \$15.00.

1. Name of Corporation ESW, INC.	2. Date of Incorporation / Admission 1-23-89
3. Principal Office Address of the Corporation (Street, City, State and ZIP Code) 1200 SHEFFIELD AVE. DYER, IN 46311	
4. Assumed Business Name(s) LEISURE TIME LEARNING CENTER	
5. Address at which the Corporation will do business under assumed business name (Street, City, State and ZIP Code) 1200 SHEFFIELD AVE. DYER, IN 46311	
6. Signature <i>Lawrence M Caldwell</i>	Name Printed LAWRENCE M. CALDWELL

Document is NOT OFFICIAL!
This Document is the property of the Lake County Recorder!

STATE OF Indiana COUNTY OF Lake SS: _____

Subscribed and sworn or attested to before me, this 27 day of April 1992.

Notary Public: *Karen Kunk*
My Notarial Commission Expires: May 1, 1995
My County of Residence is: Lake

RECORDED
APR 27 3 43 PM '92
STATE OF INDIANA
SECRETARY OF STATE



I, _____ Recorder of _____ County, State of Indiana, certify that the foregoing is a true copy of the Certificate of Assumed Business Name recorded in my office on the _____ day of _____ 19____.

Recorder Signature

This instrument was prepared by *Patricia Webbe*

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