

CERTIFICATE OF ASSUMED BUSINESS NAME

State Form 30353 (R4 / 3-87) Approved by State Board of Accounts 1987

92073411

Provided by: EVAN BAYH
Secretary of State of Indiana
155 State House
Indianapolls, Indiana 46204
(317) 232-6576

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

1. Name of Corporation ONKAR, INC. 3. Principal Office Address of the Corporation (Street, City, State and ZIP Code)		2. Date of Incorporation / Admission Application Attached		
1-120 Reyome Drive				
Washuso Brigingsa Mame(s)				
2 B 76 Address at which the Corporation will do business under as	sumed business name (Street, City, 5	State and ZIP Code)		
401 S. Grand, Gary				
. Signature	Name Printed			
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Subscribed and sworn or attested to before me, this	s: 17ith	day of Wat	ember C	2
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Notarial Commission Expires:				
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County of Residence is: Lake	E CONTRACTOR OF THE PARTY OF TH			
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corder Signature	<u> </u>		<u> </u>	
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