

This instrument was prepared by

CERTIFICATE OF ASSUMED BUSINESS NAME

State Form 30353 (R4 / 3-87)

Approved by State Board of Accounts 1987
43033987

Provided by: EVAN BAYH

Secretary of State of Indiana

155 State House

Indianapolis, Indiana 46204

(317) 232-6578

93033987	(317) 232-6576
INSTRUCTIONS: (CORPORATIONS ONLY)	
This certificate must first be recorded in the office of County Recorder of each co	unty 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 Secreta	ry of State, Indiana Code 23-15-1-1
Fee for filling with the Secretary of State: \$30,00 or \$45.00, if a certificate issued by	y the Secretary of State is desired:
1. Name of Corporation	2. Date of Incorporation / Admission
Jovan's Enterprises, Inc.	April 1, 1993
3. Principal Office Address of the Corporation (Street, City, State and ZIP Code)	
139 S. Broad Street, Griffith, IN 46319	
4. Assumed Business Name(s)	,
Jovan's	70.0
5. Address at which the Corporation will do business under assumed business name (Street, C 139 S. Broad Street, Griffith, IN 46319	ity, State and ZIP Godel
6. Signature Name Printe	15
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This Document is the p	roperty of S
STATE OF INDIANA the Lake County Re	roperty of ALL STATE Corder!
SS:	
COUNTY OFLAKE	
	day of day
Subscribed and sworn or attested to before me, this 20th	day of Nav
19 <u> 93</u>	2 m 19 iii
Hotary Public , Sue A. Langer	3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3
Sul a Langer	
Ny Notarial Commission Expires:	
12/18/94 0	
My County of Pesidence is:	
Lake	
SEAL SEAL	
I. Sam Orlich , Recorder And	Lake County,
State of Indiana, certify that the foregoing is a true copy or the Cert	ificaté of Assumed Susiness Name recorded in my i
m · · ·	
office on the day of _	
19	
Recorder Signature	

