



CERTIFICATE OF ASSUMED BUSINESS NAME

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

INDIANA SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. WASHINGTON ST., RM. E018
INDIANAPOLIS, IN 46204

(317) 232-6676

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 29-15-1-1

Fee for filing with the Secretary of State: \$30.00 or \$45.00, if a certificate issued by the Secretary of State is desired.

1. Name of Corporation T & D WHOLESALE, INC	2. Date of Incorporation / Admission January 28, 1983
3. Principal Office Address of the Corporation (Street, City, State and ZIP Code) 610 Sherman Street Crown Point, IN 46307	
4. Assumed Business Name(s) T D AUTO	
5. Address at which the Corporation will do business under assumed business name (Street, City, State and ZIP Code) 610 Sherman Street Crown Point, IN 46307	
6. Signature <i>[Handwritten Signature]</i>	Name Printed THOMAS DURANT

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NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

STATE OF INDIANA

COUNTY OF LAKE

Subscribed and sworn or attested to before me, this 5th day of June, 1995

Notary Public [Handwritten Signature]
My Notarial Commission Expires: 4-1-97
My County of Residence is: [Handwritten Signature]

RECORDER'S OFFICE
LAKE COUNTY
INDIANA

NOTARY PUBLIC STATE OF INDIANA
LAKE COUNTY
MY COMMISSION EXP. APR. 1, 1997

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
95 JUN - 5 AM 8:52
MAY 25 1995
RECORDER

I, MARGARETTE N. CLEVELAND, Recorder of LAKE 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 5TH day of JUNE, 1995

Recorder Signature [Handwritten Signature]

This instrument was prepared by THOMAS DURANT

600