## CERTIFICATE OF ASSUMED BUSINESS NAME

for individuals (sole proprietorships), firms, or partnerships engaged in business under a name other than their own (DBA)

STATE OF INDIANA, COUNTY OF LAKE
NAME OF BUSINESS: Floor FASHions
KIND OF BUSINESS: Cappeting and TNStallasions
PLACE OF BUSINESS: 2 Bocument is 9M9, In, 46 489
PRINTED NAMES AND RESIDENCES OF MEMBERS OF FIRMOR PARTNERSHIP.  This Document is the property of
at the Lake County Recorder!
I hereby certify that I have personal knowledge of the facts stated above and that each 2 3 of them are true.
Written Signature Printed Name Capacity of Signer
FORM PREPARED BY: Anthony C. YARBROJAH
If this form has been faxed to you, it must be copied onto

If this form has been faxed to you, it must be copied onto regular paper before filing. The completed form must be filed in the Office of the County Recorder of each County in which a place of business or office is located.

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