

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: BW Service

KIND OF BUSINESS: Appliance Service

PLACE OF BUSINESS: 2359 Dyer Dr

PRINTED NAMES AND RESIDENCES OF MEMBERS OF FIRM OR PARTNERSHIP:

William L. Wedel at 2359 Calumet Dyer IN 46311



I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.

William L. Wedel
Written Signature

William L. Wedel
Printed Name

William L. Wedel
Capacity of Signer

FORM PREPARED BY: William L. Wedel

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.

Filed on November 14, 19 95. Margarette Cleveland, Recorder

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MARGARETTE CLEVELAND
RECORDER

STATE OF INDIANA
LAKE COUNTY
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