



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) 232-6576

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

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 Garza Halajcsik Corporation	2. Date of Incorporation / Admission February 6, 1996
3. Principal Office Address of the Corporation (Street, City, State and ZIP Code) 12022 - 90th Avenue, St. John, Indiana 46373	
4. Assumed Business Name(s) Lindo Environmental	
5. Address at which the Corporation will do business under assumed business name (Street, City, State and ZIP Code) 12022 - 90th Avenue, St. John, Indiana 46373	
6. Signature <i>Oscar Garza</i>	Name Printed Oscar Garza

STATE OF INDIANA

COUNTY OF PORTER SS: _____

Subscribed and sworn or attested to before me, this 16th day of April, 1996

Notary Public
Karla Jean Reder *Karla Jean Reder*

My Notarial Commission Expires: 11/28/97

My County of Residence is: Porter County

I, _____, Recorder of _____ County, State of Indiana, certify that the foregoing is a true copy of the Certificate of Assumed Business Name recorded in _____ office on the _____ day of _____, 19____.

Recorder Signature _____

STATE OF INDIANA
 LAKE COUNTY
 RECORDER FOR RECORD
 96 APR 18 AM 8:54
 MARGARET CLEVELAND
 RECORDER

This instrument was prepared by **H. Jonathon Costas, COSTAS NORMAN & BOESCH, 2708 Calumet Avenue, Valparaiso, Indiana 46383 Telephone: (219) 462-5104**



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