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

	NAME OF BUSINESS: <u>CPS FINANCIAL SERVICES</u> KIND OF BUSINESS: <u>FINANCIAL SERVICES (Accounting)</u>	
	PLACE OF BUSINESS: 625 W 39th PL # 7A Hobart For 46342	
	PRINTED NAMES AND RESIDENCES OF MEMBERS OF FIRM OR PARTNERSHIP Document is	
- >	CHARLES STITE AT QUES QUESTION TO 46342 This Document is the property of	
	the Lake County Recorder!	
	AT	2
	AT	5
	I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.	
	Chul Stick Still	
	PRINTED NAME Owner CAPACITY OF SIGNER	
	THE COMPLETED FORM MUST BE FILED IN THE OFFICE OF THE COUNTY RECORDER OF EACH COUNTY IN WHICH A PLACE OF BUSINESS OR OFFICE IF LOCATED.	
	FILED ON Lept 13, 1994. Aggretation RECORDER	

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