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: Vitamin Fower		
KIND OF BUSINESS: Nutritional Health Products		
PLACE OF BUSINESS: 1005-150th.ST Hammon IN	463.	27
PRINTED NAMES AND RESIDENCES OF MEMBERS OF FIRM OR PARTNERSHIP Document is		
 This Document is the property of	9	
the Lake County Recorder!	606	
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Company of the Compan	10	-11
I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.	96 SEP 3	
Joseph McCarthy Sin	ည်	AKE CO
WRITTED SIGNATURE PRINTED NAME DWINEY	MI:	
CAPACITY OF SIGNER	23	AD S
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 Sept 30, 1994. RECORDER		