



INFORM DOC. # 5076
CERTIFICATE OF ASSUMED BUSINESS NAME
 (All Corporations)
 State Form 30363 (R7 / 4-88)
 State Board of Accounts Approved 1986

→ Hold Gerald & Crosby
 (219) 345 2092

SUB ANNE GILROY
 SECRETARY OF STATE
 CORPORATIONS DIVISION
 302 W Washington St., Rm. 8018
 Indianapolis, IN 46204
 Telephone: (317) 832-6878

INSTRUCTIONS:

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.
 Please TYPE or PRINT.

Indiana Code 23-15-1-1, et seq.

FILING FEES PER CERTIFICATE:

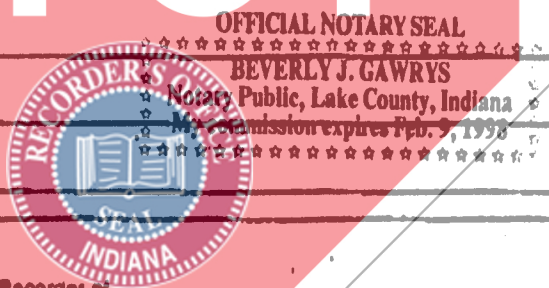
For-Profit Corporation, Limited Liability Company, Limited Partnership \$90.00
 Not-For-Profit Corporation \$25.00
 Certificate - Additional \$15.00

1. Name of Corporation <u>Crosby Enterprises Inc.</u>	2. Date of incorporation / admission <u>4-25-91</u>	96083095
3. Principal office address of the Corporation (street address) <u>9434 Mallard IN</u>		
City, state and ZIP code <u>St. John IN 46373</u>		
4. Assumed business name(s) <u>Elite Photography</u>		
5. Address at which the Corporation will do business under assumed business name (street address) <u>9434 Mallard IN</u>		
City, state and ZIP code <u>St. John IN 46373</u>		
6. Signature <u>Gerald & Crosby</u>		



STATE OF Indiana 89:
 COUNTY OF Lake
 Subscribed and sworn or attested to before me, this 10 18th day of December
 Notary Public Beverly J. Gawryls
 My Notarial Commission Expires: Feb. 9, 98
 My County of Residence is: Lake

STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORD
 96 DEC 13 PM 12:19
 JACQUELLE C. BLAND
 RECORDER



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

This instrument was prepared by: _____

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