



CERTIFICATE OF ASSUMED BUSINESS NAME

(All Corporations)

State Form 30353 (R7 / 4-95)

State Board of Accounts Approved 1995

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

SUE ANNE GILROY
SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. Washington St., Rm. E018
Indianapolis, IN 46204
Telephone: (317) 232-6576

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.

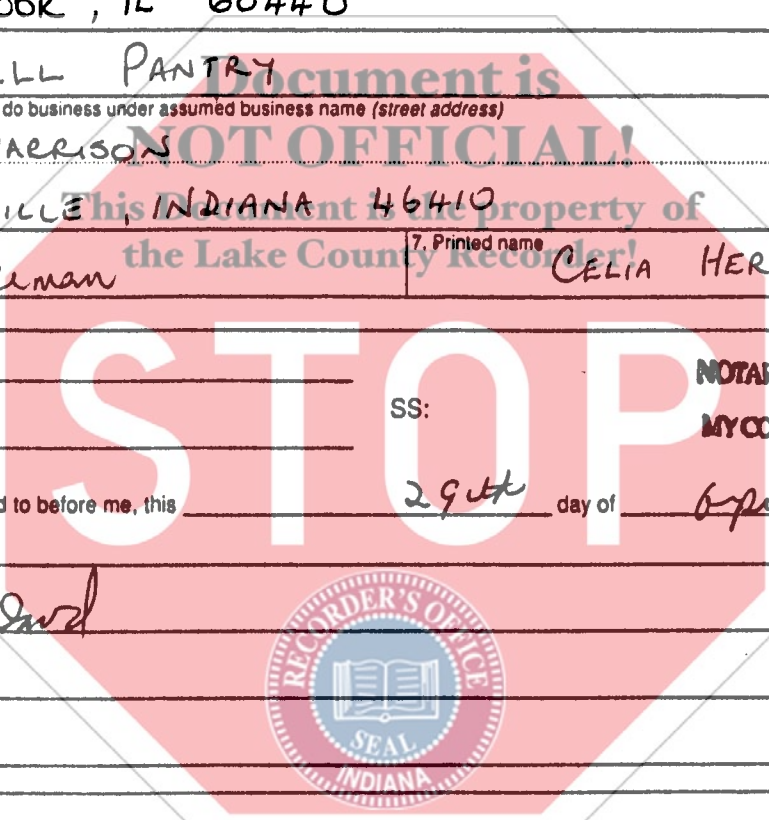
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97 APR 29 PM 2:04 Indiana Code 23-15-1-1, et seq.

FILING FEES PER CERTIFICATE:

MORRIS V. (For Profit Corporation, Limited Liability Company, Limited Partnership)	\$30.00
RECORDED (Not-For-Profit Corporation)	\$26.00
Certificate - Additional	\$15.00

1. Name of Corporation WORLD-MART INC	2. Date of incorporation / admission 12-02-96
3. Principal office address of the Corporation (street address) 156 PAMELA DRIVE	
City, state and ZIP code BOLINGBROOK, IL 60440	
4. Assumed business name(s) BELL PANTRY	
5. Address at which the Corporation will do business under assumed business name (street address) 5650 HARRISON	
City, state and ZIP code MERRILLVILLE, INDIANA 46410	
6. Signature <i>Celiaman</i>	7. Printed name CELIA HERMAN



STATE OF _____

COUNTY OF _____

Subscribed and sworn or attested to before me, this 29th day of April, 1997.

Notary Public
Sheronda L. Dowd

My Notarial Commission Expires: _____

My County of Residence is: _____

SS: **SHERONDA L. DOWD**
NOTARY PUBLIC STATE OF INDIANA
LAKE COUNTY
MY COMMISSION EXP. MAY 5, 2000



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: _____

9:00
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CIC 241