

for individuals (sole proprietorships), firms
or partnerships engaged in business under a name
other than their own (CORP)

FILED FOR RECORD

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STATE OF INDIANA, COUNTY OF Lake

NAME OF BUSINESS: Au Naturel

KIND OF BUSINESS: Travel Club

PLACE OF BUSINESS: Home-based { 1919 W. 64th Place, Merrillville IN 46410
Mailing Address: POB #12206, Merrillville IN 46411-2206

PRINTED NAMES AND RESIDENCES OF MEMBERS OF FIRM OR PARTNERSHIP

JOSE L. ZAMORA AT 1919 W. 64th Pl., Merrillville, IN 46410

LISA A. ZAMORA AT 1919 W. 64th Pl., Merrillville, IN 46410

_____ AT _____

_____ AT _____

_____ AT _____

I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.

JOSE L. ZAMORA
LISA A. ZAMORA
WRITTEN SIGNATURE

Lisa A. Zamora
PRINTED NAME

owners
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 IS LOCATED.

FILED ON November 5, 1997 M. W. Cost RECORDER

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