



CERTIFICATE OF ASSUMED BUSINESS NAME

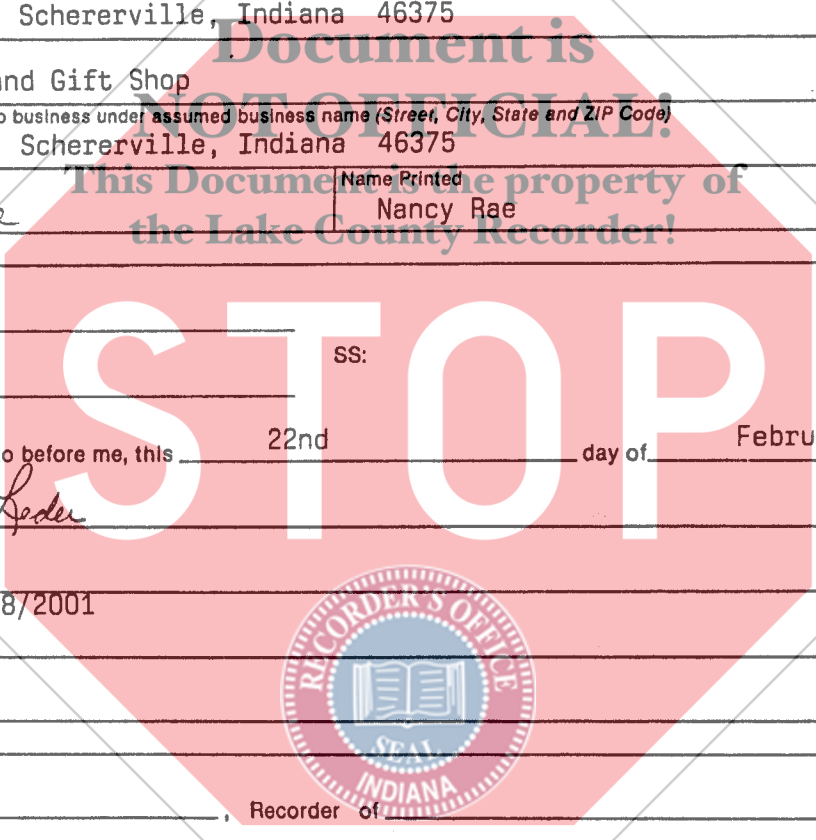
State Form 30353 (R4 / 3-2000) 012420
Approved by State Board of Accounts 1987

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
INDIANA SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. WASHINGTON ST., RM. E018
INDIANAPOLIS, IN 46204
MORRIS W. CARTER
RECORDER (317) 232-6576

INSTRUCTIONS: (CORPORATIONS ONLY)
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. Indiana Code 23-15-1-1

Fee for filing with the Secretary of State: \$30.00 or \$45.00, if a certificate issued by the Secretary of State is desired.

1. Name of Corporation R and R, Inc.	2. Date of Incorporation / Admission January 28, 2000
3. Principal Office Address of the Corporation (Street, City, State and ZIP Code) 44 East Joliet Street, Schererville, Indiana 46375	
4. Assumed Business Name(s) Schererville Florist and Gift Shop	
5. Address at which the Corporation will do business under assumed business name (Street, City, State and ZIP Code) 44 East Joliet Street, Schererville, Indiana 46375	
6. Signature <i>Nancy Rae</i>	Name Printed Nancy Rae



STATE OF INDIANA
 COUNTY OF LAKE SS:
 Subscribed and sworn or attested to before me, this 22nd day of February, 19 2000.
 Notary Public *Karla Jean Ruder*
 My Notarial Commission Expires: 11/28/2001
 My County of Residence is: Porter

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 C. Donald Emery, III, EMERY CLEMENT & SCHMIDT, P.C., 370 West 80th Place, Merrillville, Indiana 46410. Telephone: (219) 756-0555.

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