



**CERTIFICATE OF ASSUMED BUSINESS NAME
(All Corporations)**

State Form 30353 (R7/4-95)

State Board of Accounts Approved 1995

2000 017570

STATE OF INDIANA
LAKE COUNTY
FILED RECORD

2000 MAR 14 AM 3:59

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.

MO 2 Indiana Code 23-15-1-1, et seq.

FILING FEES PER CERTIFICATE:

For-Profit Corporation, Limited Liability Company, Limited Partnership	\$30.00
Not-For-Profit Corporation	\$26.00
Certificate - Additional	\$15.00

1. Name of Corporation Welch, Inc.	2. Date of incorporation / admission 10/21/99
3. Principal office address of the Corporation (street address) 1205 North Calumet Avenue City, state and ZIP code Hammond, IN 46320	
4. Assumed business name(s) Phil Smidt & Son.	
5. Address at which the Corporation will do business under assumed business name (street address) 1205 North Calumet Avenue City, state and ZIP code Hammond, IN 46320	
6. Signature <i>David E. Woodward</i> - President	7. Printed name DAVID E. WOODWARD



STATE OF Indiana

COUNTY OF Lake SS:

Subscribed and sworn or attested to before me, this 13th day of March, 2000.

Notary Public David E. Woodward

My Notarial Commission Expires: 08/05/01

My County of Residence is: Porter

I, _____ Recorder of Lake 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 March, 2000.

Recorder Signature

This instrument was prepared by: David E. Woodward, Lucas, Holcomb & Medrea
300 East 90th Drive, Merrillville, IN 46410

10.00
E.P.
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