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CERTIFICATE OF ASSUMED BUSINESS NAME

For persons (sole proprietorships, associations, or general partnerships)
Engaged in business under a name other than their own (DBA)

STATE OF INDIANA, COUNTY OF Lake

NAME OF BUSINESS: Your Angels Day Care Home

NATURE OF BUSINESS: Day Care

ADDRESS OF BUSINESS: 5304 W 7th Ave Gary IN 46404

PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:

Irma De Ramus at 5304 W 7th Ave Gary IN 46404

at _____

at _____

at _____

at _____

FORM PREPARED BY: Irma De Ramus

Irma De Ramus Irma De Ramus Owner
Member's Signature Printed Name Capacity

Filed on 3/22/00, _____, Recorder.. M. W. Carter

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Om
Cust.