STATE OF INDIANA
LAKE COUNTY
FILED COORD

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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 NAME OF BUSINESS: NATURE OF BUSINESS: Nome based ADDRESS OF BUSINESS: 4243 Llohman PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS: 4243 Hohman JACK Swisher at FORM PREPARED BY: Jandia Man W. Cas Filed on \_

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