STATE OF INDIANA LAKE OF INTY FILED 1000

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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)

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NAME OF B	usiness: 2	ULHFO	anter	pris	es	•	
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ADDRESS O	F BUSINESS	: 3600	Shaff	rield	dot.	215	
PRINTED N	AMES AND I	RESIDENCES	OF MEMI	BERS OF	BUSINESS	•	
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Committee		English NO	Mr. sussis	-1			
FORM	M PREPARED	BY:	Min -	26/9	A L		
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