

2000-061616

STATE OF INDIANA

CERTIFICATE OF ASSUMED

2000 0616 BUSINESS NAME 49

MORRIS W. CARTER
RECORDER

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 JASON'S POOL CARE

NATURE OF BUSINESS SWIMMING POOL SERVICE

ADDRESS OF BUSINESS 527 N. County Line Rd. 46342

PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:

JASON T. COCHRAN at 527 N. County Line Rd 46342

at _____

at _____

at _____

at _____

at _____

FORM PREPARED BY: JASON T. COCHRAN

Jason T. Cochran JASON T. COCHRAN OWNER
Member's Signature Printed Name Capacity

Filed on 8-24, 2000, Morris W. Carter, Recorder

9.00
E.P.
CS