STATE OF INDIANA LAKE COUNTY FILED FOR PLOORD

2000 061999

2000 AUG 25 PH 3: 27

MORRIS W. CARTER FROORDER

STATE OF INDIANA)
)SS:
COUNTY OF LAKE)

CERTIFICATE OF ASSUMED BUSINESS NAME

NOT OFFICIAL!

THIS IS TO CERTIFY THAT the undersigned, Southlake/Tri-City Management Corp., an Indiana corporation, with offices at 5281 Fountain Drive, Crown Point, IN 146307, is engaged in conducting and transacting business from time to time in the State of Indiana under the name: Community Behavioral Health Network.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Assumed Business Name this _______ day of August, 2000.

SOUTHLAKE/TRI-CITY MANAGEMENT CORP.

By: Kathryn D. Whittington, Ph.D.
President

ATTEST:

Robert D. Krumwied, Secretary

1

Before me, a Notary Public, in and for said County and State this 25th day of August, 2000, personally appeared Kathryn D. Whittington, Ph.D. and Robert D. Krumwied, President and Secretary, respectively, of Southlake/Tri-City Management Corp., who, as such President and Secretary, for and on behalf of said Corporation, acknowledged the execution of the above and foregoing Certificate of Assumed Business Name and affirmed that the statements therein contained are true.

WITNESS my hand and official seal. A

This Document facing Sei Frost

A resident of Porce County

My Commission Expires:

AUGUST 1, 2001

This Instrument Prepared By: Laura B. Frost, Attorney at Law 8700 Broadway, Merrillville, IN 46410

28916



Official Stamp

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MORRIS W. CARTER RECORDER

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	Ramsey J. Mallony, Sh.
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