

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2000 SEP 25 AM 10:39

2000 069776

MORRIS W. CARTER
RECORDER



CERTIFICATE OF ASSUMED BUSINESS NAME
(All Corporations)

State Form 30268 (RS, 9-97)
State Board of Accountants Approved 1996

SUE ANNE GILROY
SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. Washington St., Rm. E018
Indianapolis, IN 46204
Telephone: (317) 232-6876

Indiana Code 23-16-1-1, et seq.

INSTRUCTIONS:

- This certificate must also be recorded in the office of County Recorder of each county in which a piece of business or office is located.
- FEE'S ARE PER ASSUMED NAME. Please make check or money order payable to: Indiana Secretary of State.
Please TYPE or PRINT

FILING FEES PER CERTIFICATE:

For Profit Corporation, Limited Liability Company, Limited Partnership	\$30.00
Not-For-Profit Corporation	\$25.00
Certificate - Additional	\$15.00

1 Name of Corporation, LLC or LP LHM Consulting & Services L.P.		2 Date of Incorporation / admission: 9-18-00
3 Address in which the Corporation, LLC, LP will do business or have an office in Indiana. If no office in Indiana, then state current (or) stored address (street address) 13 West 6th Avenue Gary, Indiana 46402		
4 Assumed business names: (\$30.00 per name) LHM Consulting & Services L.P.		
5 Principal office address of the Corporation, LLC, LP (street address) 510 Sandburg Drive Manteno, IL 60950		
6 Signature Loi Clayton	7 Printed name Loi Clayton	
STATE OF IL		
COUNTY OF KANKAKEE SS:		
Subscribed and sworn or attested to before me, this 18th day of Sept , 2000		
Notary Public Gaylene Johnston		
My Notarial Commission Expires 02-04-2001		My County of Residence is: KANKAKEE
This instrument was prepared by: Loi Clayton / LHM Consulting & Services L.P.		

“OFFICIAL SEAL”
Gaylene Johnston
Notary Public, State of Illinois
My Commission Exp. 02/04/2001

9-18-00
cash



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MORRIS W. CARTER
RECORDER

Document Mail Back to Information Sheet

This is where you want the recorded document sent back to when it has completed the recording process.

Name LHM Consulting & Services L.P.

Address 13 W. 6th Ave.

City St Zip Dary, Ind. 46402

Telephone (219) 885-2080

Signature Printed Lori Clayton

Signature Written Lori Clayton

Date of Signature 9/25/00

Check Number Cash

Check Amount \$9.00

Office Use Only

Check Equals Amount Due Yes No

Total _____

Initials _____