CERTIFICATE OF ASSUMED 2002 0424 BUSINESS NAME:

For persons (sole proprietorships, associations, or general partnerships) Engaged in business under a name other than their own (DBA) Lake STATE OF INDIANA, COUNTY NAME OF BUSINESS Natural Health Supplement **NATURE OF BUSINESS** Massage T ADDRESS OF BUSINESS 32 PRINTED NAMES AND RESIDENCES OF MEMBER OF BUSINESS: W. 15/5t This Document is athe property of the Lake County Recorder! at at at FORM PREPARED BY: Member's Signature **Printed Name**

9.00.P