

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2002 DEC -9 11:10:58

MORRIS W.  
RECORDER

SUE ANNE CALROY  
SECRETARY OF STATE  
CORPORATIONS DIVISION  
302 W. Washington St., Rm. E018  
Indianapolis, IN 46204  
Telephone: (317) 232-6576

Indiana Code 23-15-1-1, et seq.

**FILING FEES PER CERTIFICATE:**

For-Profit Corporation, Limited Liability Company, Limited Partnership **\$30.00**  
Not-For-Profit Corporation **\$26.00**



**CERTIFICATE OF ASSUMED BUSINESS NAME  
(All Corporations)**

State Form 30353 (R10 / 1-02)  
State Board of Accounts Approved 2002

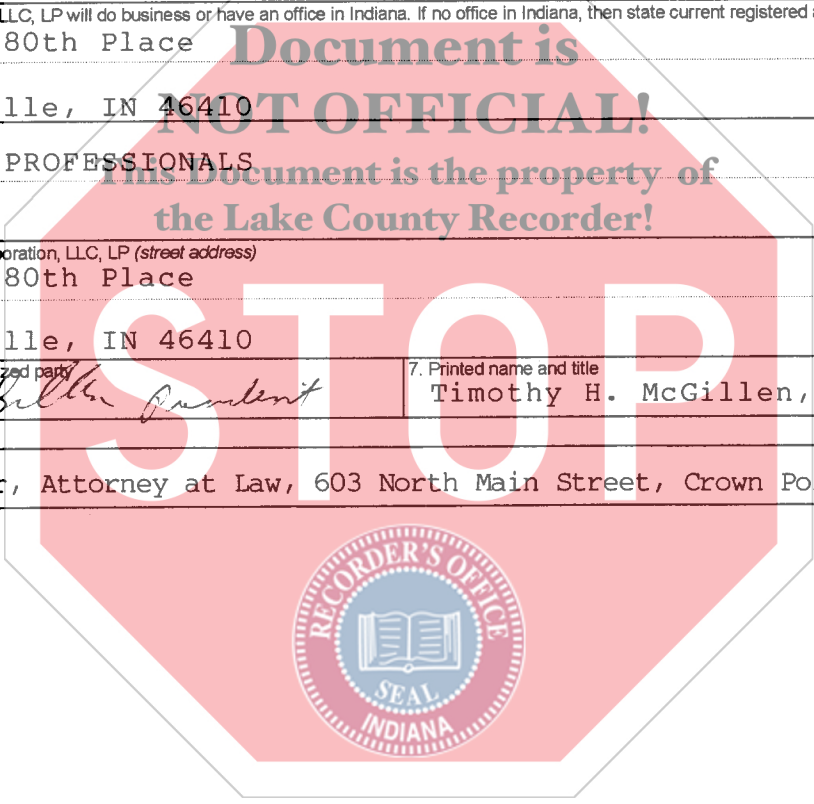
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**INSTRUCTIONS:**

1. This certificate must also be recorded in the office of County Recorder of each county in which a place of business or office is located.
2. FEES ARE PER CERTIFICATE. Please make check or money order payable to Indiana Secretary of State.

Please TYPE or PRINT.

1. Name of Corporation, LLC or LP TIMOTHY H. MCGILLEN, P.O.C.		2. Date of incorporation / admission / organization 1981	
3. Address at which the Corporation, LLC, LP will do business or have an office in Indiana. If no office in Indiana, then state current registered address (street address) 279 West 80th Place			
City, state and ZIP code Merrillville, IN 46410			
4. Assumed business name(s) EYE CARE PROFESSIONALS			
5. Principal office address of the Corporation, LLC, LP (street address) 279 West 80th Place			
City, state and ZIP code Merrillville, IN 46410			
6. Signature of officer or other authorized party <i>Timothy H. McGillen, President</i>		7. Printed name and title Timothy H. McGillen, President	
This instrument was prepared by: Edward P. Grimmer, Attorney at Law, 603 North Main Street, Crown Point, IN 46307-3233			



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RP  
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