

2005 050763
**CERTIFICATE OF ASSUMED
BUSINESS NAME**

For persons (sole proprietorships, associations, or general partnerships) engaged in business under a name other than their own (DBA)

2005 050763

STATE OF INDIANA, COUNTY _____

NAME OF BUSINESS The Work At Home Program

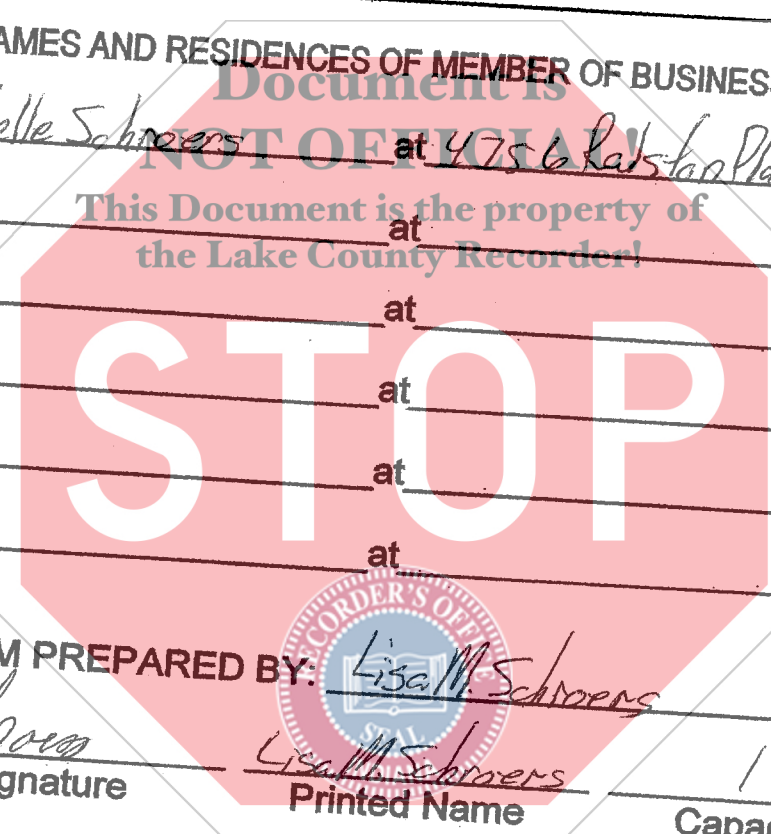
NATURE OF BUSINESS Mailing Program for Home Workers

ADDRESS OF BUSINESS _____

PRINTED NAMES AND RESIDENCES OF MEMBER OF BUSINESS

→ Lisa Michelle Schroers at 4756 Katsen Place Gr. Dr. Indianapolis, IN 46219

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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2005 JUN 20 PM 3:12
MICHAEL BROWN
RECORDER

at _____

at _____

at _____

at _____

FORM PREPARED BY: Lisa M. Schroers

Lisa M. Schroers
Member's Signature

Lisa M. Schroers
Printed Name

1
Capacity

Filed on 6/20, 05. Michael A Brown Recorder

9.00
CS PR