

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2005 APR 11 AM 11:12

MIDLAND TOWN

### INFORMATION REQUEST

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

NAME & PHONE OF CONTACT (optional) <b>Chris Hayden 756-6665</b>	FILING OFFICE ACCT # <b>010288</b>
RETURN TO: (Name and Address) <b>Guarantee Title &amp; Trust Company 7895 Broadway Suite A Merrillville, IN 46410</b>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1 DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a ORGANIZATION'S NAME <b>Bill's Diner, LLC</b>			
OR	1b INDIVIDUAL'S LAST NAME	FIRST NAME	SUFFIX

2 INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include as a Debtor name the name identified in item 1:

2a SEARCH RESPONSE  CERTIFIED (Optional)  
Select one of the following two options:  ALL (Check this box to request a response that is complete, including filings that have lapsed)  UNLAPSED

2b COPY REQUEST  CERTIFIED (Optional)  
Select one of the following two options:  ALL  UNLAPSED

2c SPECIFIED COPIES ONLY  CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)
		<i>Nothing on file</i>

3 ADDITIONAL SERVICES:

*Done 4/8/05*

4 DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item B unless otherwise instructed here):

4a  Pick Up  
4b  Other

Specify desired method here (if available from this office); provide delivery information (e.g. delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)