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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 010745

2006 FEB -9 PM 1:57

MICHAEL A. BROWN
RECORDER

Certificate of Assumed Business Name

To be used by persons who are establishing (sole proprietorships, associations, or general partnerships), and are engaged in a business under a name other than their own.

State of Indiana, County Lake

Name of Business Four Seasons Virtual Assistance

Nature of Business ~~Photography~~ Secretarial

Address of Business 3208 Rustic Lane, Crown Point IN 46307

Printed names and residences of member(s) of business:

→ Debra Higgins at 3208 Rustic Lane, Crown Point IN 46307

This Document is the property of
the Lake County Recorder!

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Form prepared by: Debra Higgins

Debra Higgins Debra Higgins Owner
Members's Signature Printed Name Capacity

Filed on 2-9-06, Michael A Brown, Recorder
HaeChfDep/7/09/05

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Prescribed by the
State Board of Accounts
(2005)

County form 170

Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm under the penalties of perjury:

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.



Debra Higgins
Signature of Declarant

Debra Higgins
Printed Name of Declarant