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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 011125

2006 FEB 10 PM 1:14

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 TWISTED MOTORSPORTS LLP

Nature of Business RACING

Address of Business 309 BIRCH ST CROWN POINT IN 46307

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

MICHAEL SIMONS at 5209 HANLEY LN CROWN POINT IN

TIM RICHARDS at 309 BIRCH ST CROWN POINT

_____ at _____

_____ at _____

_____ at _____

Form prepared by: Tim Richards

[Signature]
Members's Signature

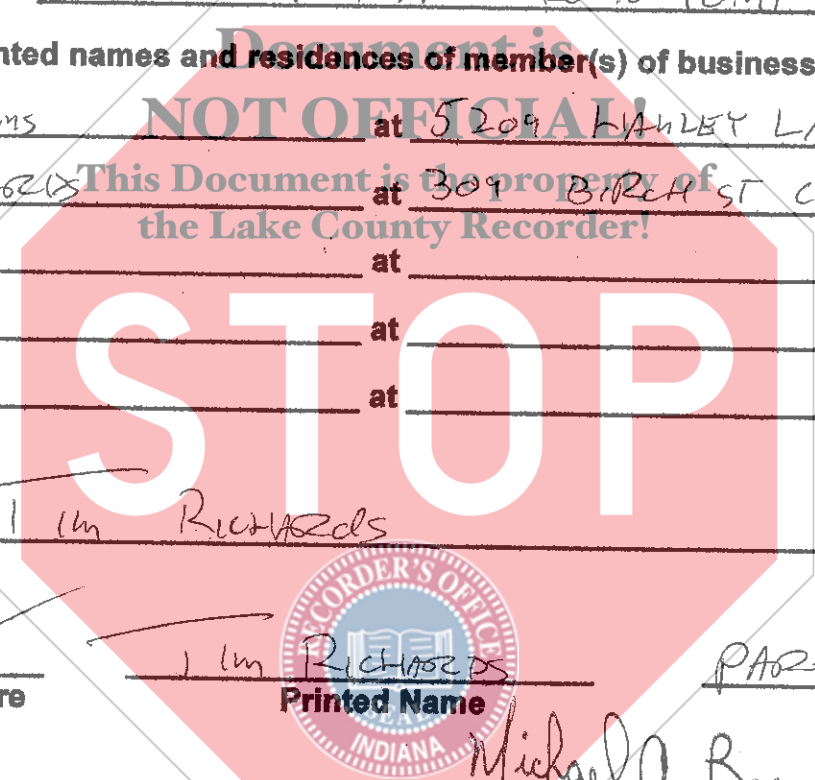
Tim Richards
Printed Name

PARTNER
Capacity

Filed on Feb 10, 2006

Michael A Brown, Recorder

HacChfDep/7/09/05



1782
CS

Prescribed by the
State Board of Accounts
(2005)

County form 170

Declaration

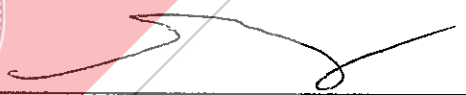
This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

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.




Signature of Declarant

J. L. Richards
Printed Name of Declarant