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MICHAEL A. BROWN
RECORDER

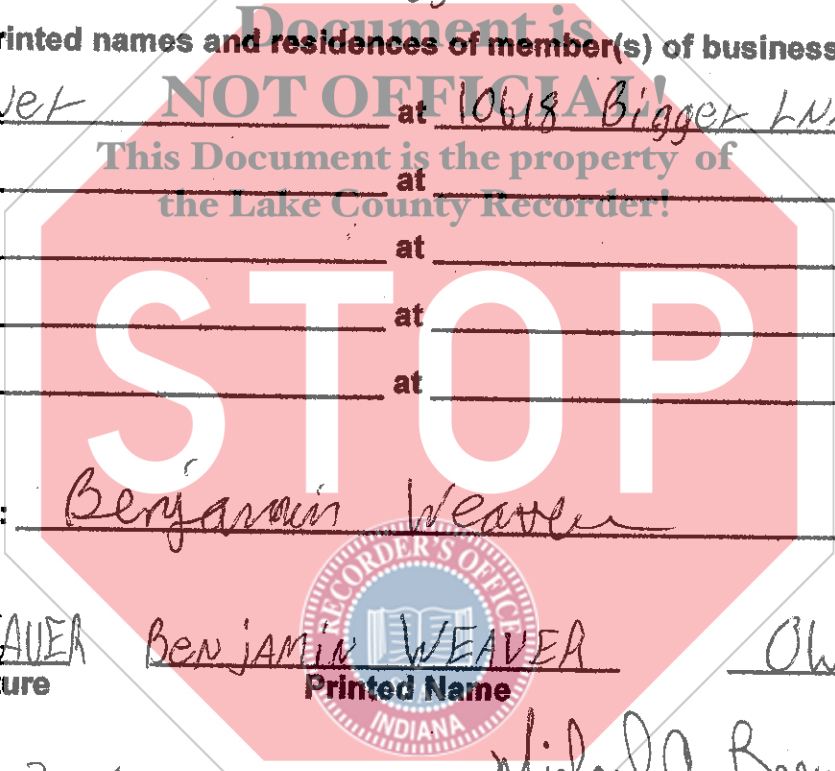
Certificate of Assumed Business Name

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 COUNTY
Name of Business ABOVE AND BEYOND LANDSCAPING
Nature of Business LAND SCAPING
Address of Business 10618 BIGGET LN. CROWN POINT IN. 46307

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

BEN WEAVER at 10618 BIGGET LN. CROWN POINT IN. 46307
at _____
at _____
at _____
at _____



Form prepared by: BENJAMIN WEAVER

BENJAMIN WEAVER BENJAMIN WEAVER OWNER
Members's Signature Printed Name Capacity

Filed on 2-10-2006, 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.



Benjamin Weaver
Signature of Declarant

BENJAMIN Weaver
Printed Name of Declarant