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LAKE COUNTY FILED FOR RECURD

2006 015370

MICHAEL A. BROWN RECORDER

2006 FEB 27 PM 2: 54

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 Annointed Hands, Inc |
| Nature of Business Homemaker, House Keeping & Janitorial Service |
| Address of Business 1501 W 86th AVE, MERRILLVILLE IN 46410 |
| Printed names and residences of member(s) of business: |
| This Document is the property of |
| the Lake County Recorder! |
| at |
| at |
| atat |
| |
| Form prepared by: |
| Olice H. Rudolph Alice H. Rudolph Proprietor |
| Members's Signature Hice H. Madolph Printed Name Capacity |
| |
| Filed on 2-27-06, Mickael U Drown, Recorder \$1 |
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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 herby affirm under the penalties of perjury: County Recorder

- 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

Printed Name of Declarant