CERTIFICATE OF ASSUMED BUSINESS NAME

for persons (sole proprietorships, associations, or general partnerships) engaged in business under a name other than their own (DBA)

2007 100335

STATE OF INDIANA, COUNTY OF **Lake**

NAME OF BUSINESS: Atlas Insurance Group

NATURE OF BUSINESS: Insurance sales

ADDRESS OF BUSINESS: 1445 West 94th Ave., Crown Point, IN 46307

PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:

Andrew Pedone	at	1447 West 94th Ave., Crown Point, IN 46307
	at	
	at	
	at	

2007 DEC 26 PM 12:46
MICHAEL A. BROWN
RECORDER

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

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STOP

SECTION TO BE COMPLETED BY/IN PRESENCE OF NOTARY PUBLIC OR COUNTY RECORDER

I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.

Member's Signature	Printed Name	Capacity
[signature]	Andrew Pedone	Owner

Subscribed and sworn to before me, this 30 day of Nov., 2007.

Signature of Notary/Recorder	Printed Name	County of Residence
[signature]	Toni L. Turley	Porter

NOTARY PUBLIC NOTARY SEAL STATE OF INDIANA
TONI L. TURLEY
Porter County
My Commission Expires
November 26, 2010

(Notaries only) my commission expires 11-26-2010

FORM PREPARED BY: Aimee Carramanzana, Legalzoom.com Inc.

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law Andrew Pedone
Member's Signature

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