2086 IAA 31 PM 1: 45

MEGRANA SKOWN

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

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Name of Bu	usiness //	E DESIGN	STUDIO		
Nature of B	. (RAPI-11C De	ESIGN & WEL	3 DESIGN	
Address of	Business 400/	LAKE F	DARK AVE, O	XFORD 11 EA	457
Address VI	1/0/	SART IN	46342 es of member(s)		
- JAN	CE BROWNS				HOBART
			ty Recorder!		
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Form prepa	red by:	ANICE B	ROUN		
Juneal	Brown	JAMCE.	D. BROWN	OWNE	R
Members's	Signature	Printe	d Name	Сар	acity
Filed on M	10,0,21,54	2 008	Michael a	Brown	Pacordar

(10) CS RM