

2008 067119

2008 SEP 25 PM 3:12

MICHAEL A. BROWN
RECORDER

CERTIFICATE OF ASSUMED BUSINESS NAME

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

STATE OF INDIANA, COUNTY Lake

NAME OF BUSINESS Billing Beyond Measure

NATURE OF BUSINESS Medical Billing Service

ADDRESS OF BUSINESS 6111 Harrison St. Merkillville, IN 46410

PRINTED NAMES AND RESIDENCES OF MEMBER OF BUSINESS:

→ Alicia Woods (Owner) Partner at 51 Elizabeth Hammond, IN 46326

Vivian Mendoza (Owner) Partner at 12362 Rush St. Crown Point, IN 46307

at _____

at _____

FORM PREPARED BY: Alicia Woods

<u>Alicia Woods</u>	<u>Alicia Woods</u>	<u>Owner/Partner</u>
Member's Signature	Printed Name	Capacity

Filed on Sept 25th, 2008 Michael A Brown, Recorder

100
CASH
PB

