

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 034969

2009 MAY 26 PM 1:26

MICHAEL A. BROWN
RECORDER



**CERTIFICATE OF ASSUMED BUSINESS NAME
(All Entities)**

State Form 30353 (R12 / 10-06)

Approved by State Board of Accounts 2002

TODD ROKITA
SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. Washington St., Rm. E018
Indianapolis, IN 46204
Telephone: (317) 232-6576

INSTRUCTIONS:

Use an 8 1/2" x 11" sheet of white paper for attachments.

Present original and one (1) copy to address in upper right corner of this form.

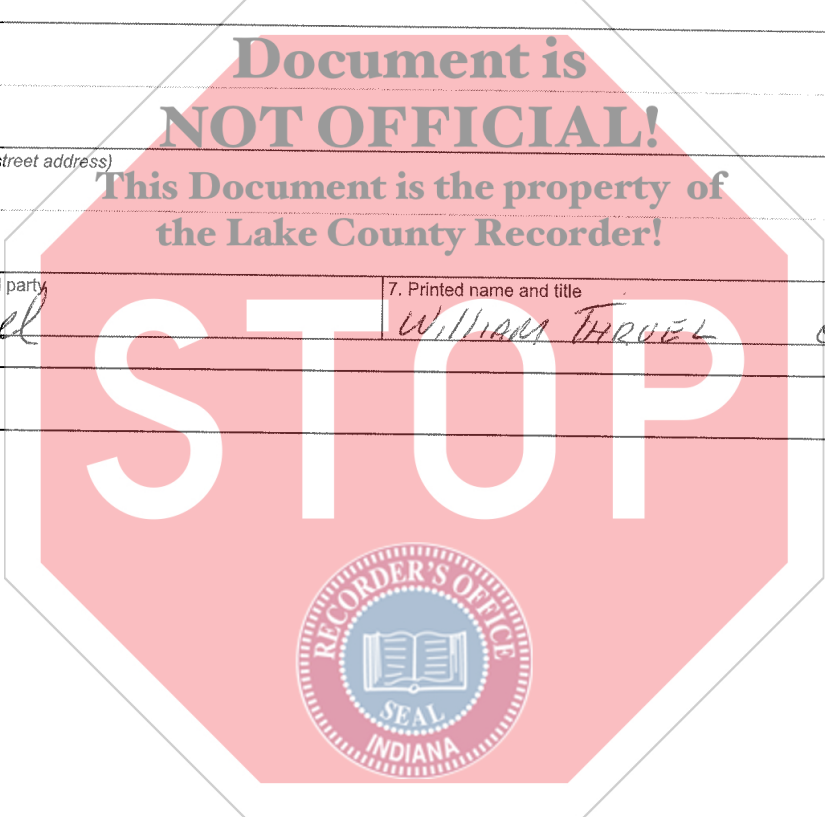
Please TYPE or PRINT.

Please visit our office on the web at www.sos.in.gov.

FILING FEES PER CERTIFICATE:

For-Profit Corporation, Limited Liability Company, Limited Partnership \$30.00
Not-For-Profit Corporation \$26.00

1. Name of entity William Thruel		2. Date of incorporation / admission / organization 05/26/2009	
3. Address at which the entity will do business or have an office in Indiana. If no office in Indiana, then state current registered address (street address) 6370 Marshall St.			
City, state and ZIP code Merrillville IN 46410			
4. Assumed business name(s) Bill & Joan Casino Tours			
5. Principal office address of the entity (street address) 6370 Marshall St.			
City, state and ZIP code Merrillville IN 46410			
6. Signature of officer or other authorized party <i>William Thruel</i>		7. Printed name and title WILLIAM THRUEL OWNER	
This instrument was prepared by: Deanna Morgan			



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