STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 060323

2010 OCT 18 AM 9: 18

MICHE 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)

PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:  CHARLES C. PUNTILLO, D.D.S. at 1519 WILDERNESS DRIVE, SCHERERVILL  MADOLYN S. PUNTILLO at 1519 WILDERNESS DRIVE, SCHERERVILL  at at  at  CHARLES C. PUNTILLO OWNER  Member's Signature Printed Name Capacity  SECTION TO BE COMPLETED BY/IN PRESENCE OF NOTARY PUBLIC OR COUNTY RECORDER  Thereby certify that I have personal knowledge of the facts stated above and that each of them are true.  STATE OF INDIANA, COUNTY OF LAKE  Subscribed and sworn to before me, this Heller A January (Pear).  When the County of Residence Printed Name County of Residence  THERES A. JARRETT (Notaries only) my commission expires 7-4-20/5  INV Comm. Expires July 4, 2015  TORMYRETARED BY: MARSHALL J. GOLDSMITH	ADDRESS OF BUSINESS: 373/45TH STREET, HIGHLAND, INDIANA 46322 3737  PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:  CHARLES C. PUNTILLO, D.D.S. at 1519 WILDERNESS DRIVE, SCHERERVILL  MADOLYN S. PUNTILLO at 1519 WILDERNESS DRIVE, SCHERERVILL  at a	NAME OF BUSINESS: HIGH		
PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:  CHARLES C. PUNTILLO, D.D.S. at 1519 WILDERNESS DRIVE, SCHERERVILL  MADOLYN S. PUNTILLO at 1519 WILDERNESS DRIVE, SCHERERVILL  at a	PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:  CHARLES C. PUNTILLO, D.D.S.  at 1519 WILDERNESS DRIVE, SCHERERVILL  at	NATURE OF BUSINESS: GER	NERAL DENISTRY	27 vq (7 vq
CHARLES C. PUNTILLO  at 1519 WILDERNESS DRIVE, SCHERERVILL  at a	CHARLES C. PUNTILLO  at 1519 WILDERNESS DRIVE, SCHERERVILL  at a			
MADOLYN S. PUNTILLO  at  at  at  at  at  CHARLES C. PUNTILLO  OWNER  Member's Signature  Printed Name  CHARLES C. PUNTILLO  OWNER  Printed Name  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.  STATE OF INDIANA, COUNTY OF  Subscribed and sworn to before me, this  HELLE A JANUEL  Signature of Notary Public Indian Series  Notary Public Indian Ser	MADOLYN S. PUNTILLO  at  at  at  at  at  CHARLES C. PUNTILLO  OWNER  Member's Signature  CHARLES C. PUNTILLO  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  OFFICIAL SEA  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY RECORDER  LAKE  Subscribed and sworn to before me, this  OFFICIAL SEA  Printed Name  County of Residence  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  LAKE  COUNTY RECORDER  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  LAKE  County of Residence  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A. JARREIT  NOTARY PUBLIC OR COUNTY  (Nota	PRINTED NAMES AND RES	IDENCES OF MEMBERS OF BUS	INESS:
at  at  CHARLES C. PUNTILLO  Member's Signature  CHARLES C. PUNTILLO  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  Here's A Januel LAKE  Singular of Notacina seal, THERESA A JARRETT MOTARY PUBLIC INDIANA  LAKE COUNTY  Not Comm. Expires July 4, 2015  FORM PREFARED BY: MARSHALL J. GOLDSMITH	at  at  at  at  at  CHARLES C. PUNTILLO  OWNER  Member's Signature  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  THERESA A. JARRETT  NOTARY PUBLIC INDIANA  LAKE  Subscribed and sworn to before me, this  Printed Name  County of Residence  THERESA A. JARRETT  NOTARY PUBLIC INDIANA  LAKE COUNTY  (Notaries only) my commission expires  7-4-20/5  FORM TREPARED BY: MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this	CHARLES C. PUNTILLO, D.D.	.S. at 1519 WILDERN	IESS DRIVE, SCHERERVILL
at  CHARLES C. PUNTILLO  OWNER  Member's Signature  Printed Name  Capacity  SECTION TO BE COMPLETED BY/IN PRESENCE OF NOTARY PUBLIC OR COUNTY RECORDER  Thereby certify that I have personal knowledge of the facts stated above and that each of them are true.  STATE OF INDIANA, COUNTY OF  Subscribed and sworn to before me, this  LAKE  Subscribed and sworn to before me, this  Figure A January  OFFICIAL SEAL  INDIANA  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  Printed Name  County of Residence  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  Notaries only) my commission expires  TORM PREFARED BY:  MEAN A JARRETT  NOTARY PUBLIC OR COUNTY  AND COUNTY  Notaries only) my commission expires  TORM PREFARED BY:  MEAN A JARRETT  NOTARY PUBLIC OR COUNTY  AND COUNTY  AND COUNTY  Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC ANDIANA  LAKE COUNTY  My Comm. Expires July 4, 2015  FORM PREFARED BY:  MEAN AND COUNTY  MY COMM. Expires July 4, 2015  TORM PREFARED BY:  MEAN AND COUNTY  MY COMM. Expires July 4, 2015  TORM PREFARED BY:  MEAN AND COUNTY  MY COMM. Expires July 4, 2015  MEAN AND COUNTY  MY COMM. Expires July 4, 2015	at  CHARLES C. PUNTILLO  Member's Signature  CHARLES C. PUNTILLO  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  A Joneth  HERES A JARRETT  NOTARY PUBLIC - INDIANA  INCOMPLETABLE ONLY  No Comm. Explies July 4, 2015  FORM PREFARED BY:  MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this	MADOLYN S. PUNTILLO	at 1519 WILDERN	NESS DRIVE, SCHERERVILL
CHARLES C. PUNTILLO Member's Signature  Printed Name  Capacity  SECTION TO BE COMPLETED BY/IN PRESENCE OF NOTARY PUBLIC OR COUNTY RECORDER  Thereby certify that I have personal knowledge of the facts stated above and that each of them are true.  STATE OF INDIANA, COUNTY OF  Signature of Notary Public in Notaries only) my commission expires  THERESA A. JARRETT NOTARY PUBLIC - NOVANA  LAKE  Printed Name  County of Residence  THERESA A. JARRETT NOTARY PUBLIC - NOVANA  LAKE  (Notaries only) my commission expires  TORN TREPARED BY:  MARSHALL J. GOLDSMITH	CHARLES C. PUNTILLO  Member's Signature  CHARLES C. PUNTILLO  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  HELE A JANCET  LAKE  Signature of Notary Public - INDIANA  I HERES A. JARRETT  NOTARY PUBLIC - INDIANA  (Notaries only) my commission expires  THERESAA. JARRETT  NOTARY PUBLIC - INDIANA  LAKE COUNTY  My Comm. Expires July 4, 2015  FORM PRETARED BY: MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this		at	
CHARLES C. PUNTILLO  Member's Signature  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  HELE'A JAMET  OFFICIAL SEAL  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  LAKE  Signature of Notaries only my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  AND COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  AND COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  AND COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires  THERESA A JARRETT  NOTARY PUBLIC OR COUNTY  (Notaries only) my commission expires	CHARLES C. PUNTILLO  Member's Signature  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  Printed Name  County of Residence  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  Printed Name  County of Residence  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  NOTARY PUBLIC - INDIANA  LAKE  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  LAKE  SUBLETANA  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  LAKE  LAKE  SUBLETANA  THERESA A. JARRETT  NOTARY PUBLIC - INDIANA  LAKE  LAKE  LAKE  SUBLETANA  THERESA A. JARRETT  NOTARY  NOTARY PUBLIC - INDIANA  LAKE		at	
Member's Signature  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  Printed Name  County of Residence  OFFicial SEAL  THERESA A. JARRETT  NOTARY PUBLIC OR COUNTY RECORDER  I have a day of June 1.  Capacity  Adv of June 1.  All County of Residence  OFFicial SEAL  THERESA A. JARRETT  NOTARY PUBLIC OR COUNTY RECORDER  And June 1.  (Notaries only) my commission expires  My Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH	Member's Signature  Printed Name  Capacity  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.  STATE OF INDIANA, COUNTY OF  LAKE  Subscribed and sworn to before me, this  Printed Name  County of Residence  OFFICIAL SEAL  THERESA A. JARRETT  NOTARY PUBLIC-INDIANA  (Notaries only) my commission expires  My Comm. Expires July 4, 2015  FORM PREPARED BY:  MY Comm. Expires July 4, 2015  FORM PREPARED BY:  MY Comm. Expires July 4, 2015  Torm PREPARED BY:  MY Comm. Expires July 4, 2015  Torm PREPARED BY:  MY Comm. Expires July 4, 2015  Torm PREPARED BY:  MY Comm. Expires July 4, 2015  Torm Prepared Name  County of Residence  7-4-20/5  Torm Prepared Name  Torm Prepared Name  County of Residence  7-4-20/5  Torm Prepared BY:  MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015  Torm Prepared St. MY Comm. Expires July 4, 2015		at	
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.  STATE OF INDIANA, COUNTY OF LAKE  Subscribed and sworn to before me, this day of County of Residence  Fine of Notary Public - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC OR COUNTY RECORDER  (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  I HERESA A. JARRETT NOTARY PUBLIC - INDIANA (NOTARY	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.  STATE OF INDIANA, COUNTY OF LAKE  Subscribed and sworn to before me, this	Chill Fr		
I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.  STATE OF INDIANA, COUNTY OF LAKE  Subscribed and sworn to before me, this day of Clobsel 2010 (year).  Here's A Janett LAKE  Signature of Noton / Popular Printed Name County of Residence  THERESA A JARRETT NOTARY PUBLIC - INDIANA LAKE COLINTY  My Comm. Expires July 4, 2015  My Comm. Expires July 4, 2015  TORM PREPARED BY: MARSHALL J. GOLDSMITH	I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.  STATE OF INDIANA, COUNTY OF LAKE  Subscribed and sworn to before me, this day of County of Noter Declaration of	Member's Signature	Printed Name	Çapacity
Printed Name  County of Residence  OFFICIAL SEAL  THERESA A. JARRETT NOTARY PUBLIC - INDIANA LAKE COLINTY  My Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH	Printed Name  County of Residence  OFFICIAL SEAL  THERESA A. JARRETT NOTARY PUBLIC - INDIANA LAKE COUNTY  Ny Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this			. <u>2010</u> (year).
THERESA A. JARRETT NOTARY PUBLIC - INDIANA LAKE COUNTY My Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH	THEREA A. JARRETT NOTARY PUBLIC -INDIANA LAKE COLINITY  My Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this	Then so h Havel		
THERESA A. JARRETT NOTARY PUBLIC - INDIANA (Notaries only) my commission expires  LAKE COLINTY My Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH	THERESA A. JARRETT NOTARY PUBLIC - NOIANA (Notaries only) my commission expires  LAKE COUNTY  Ny Comm. Expires July 4, 2015  FORM PREPARED BY: MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this	OFFICIAL SEAL	Printed Name	
My Comm. Expires July 4, 2015 FORM PREPARED BY: MARSHALL J. GOLDSMITH	My Comm. Expires July 4, 2015 FORM PREPARED BY: MARSHALL J. GOLDSMITH  "I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this	NOTARY PUBLIC - INDIANA	(Notaries only) my commission expires	7-4-2015
	"I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this	My Comm. Expires July 4, 2015	ALL I GOLDSMITH	
				each Social Security number in this