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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 SALON UTOPIA

NATURE OF BUSINESS HAIR SALON

ADDRESS OF BUSINESS 3112 W. Lincoln Hwy. Ste. B ~~Memilville, IN~~

PRINTED NAMES AND RESIDENCES OF MEMBER OF BUSINESS: Memilville, IN
46410

Rachelle Chandler at 1850 W. Oak St. Griffith, IN
46319

at _____
at _____
at _____

FORM PREPARED BY: Rachelle Chandler

Rachelle Chandler
Member's Signature

Rachelle Chandler Owner
Printed Name Capacity

Filed on 12-27-11

William R. Spive
Recorder

\$ 11

CS

CA

