

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 OF Lake

NAME OF BUSINESS: Away We Go Travel Agency

NATURE OF BUSINESS: Travel Agent services

ADDRESS OF BUSINESS: 8861 Monfort Drive, Saint John, IN 46373

PRINTED NAMES AND RESIDENCES OF MEMBERS OF BUSINESS:

at
 at
 at
 at



Document is NOT OFFICIAL!

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 the _____ are true.

[Handwritten Signature]
Member's Signature

Joseph E. Pope Owner
Printed Name Capacity

Subscribed and sworn to before me, this 11th day of June, 202012

[Handwritten Signature] Marie Martinez Cook
Signature of Notary/Recorder Printed Name County of Residence

(Notaries only) my commission expires 10/22/12

FORM PREPARED BY: Sheila Dang, Legalzoom.com, Inc.

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law

[Handwritten Signature]
Joseph E. Pope

OFFICIAL SEAL
MARIE MARTINEZ
Notary Public - State of Illinois
My Commission Expires Oct. 22, 2012

2012 JUN 20 04:09:80

2012 JUN 20 AM 9:43:37

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

[Handwritten notes]
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CK# 0000132969
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