

2016 055108

2016 AUG 12 PM 3: 39

MICHAEL B. 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
Document is NOT OFFICIAL!

**This Document is the property of
the Lake County Recorder**

NAME OF BUSINESS L. Smith Therapeutic & Consulting Service

NATURE OF BUSINESS Therapy & Consulting

ADDRESS OF BUSINESS P.O. Box 10051 Merrillville TN

PRINTED NAMES AND RESIDENCES OF MEMBER OF BUSINESS:

Lovea Smith

↑

333 Jackson St. Gary IN 46402

46411-0031



at

FORM PREPARED BY:

[Signature]

[Signature]

Member's Signature

Lovea Smith Owner

Printed Name

Capacity

Filed on 8/12, 16

Michael B. Brown

Recorder

\$ 11.00
M.E
CASH



OFFICE OF THE LAKE COUNTY RECORDER

LAKE COUNTY GOVERNMENT CENTER
2293 NORTH MAIN STREET
CROWN POINT, INDIANA 46307

MICHAEL B. BROWN
Recorder



PHONE (219) 755-3730
FAX (219) 755-3257

Verification of Assumed Business Name

Name of Business L. Smith Therapeutic & Consulting Services

Computer Check Document is /Date 8/12/2014

Card File Check NOT OFFICIAL! /Date 8/12/2016

Name being used: No Yes

Similar Name being used: Yes No

Name of Business _____

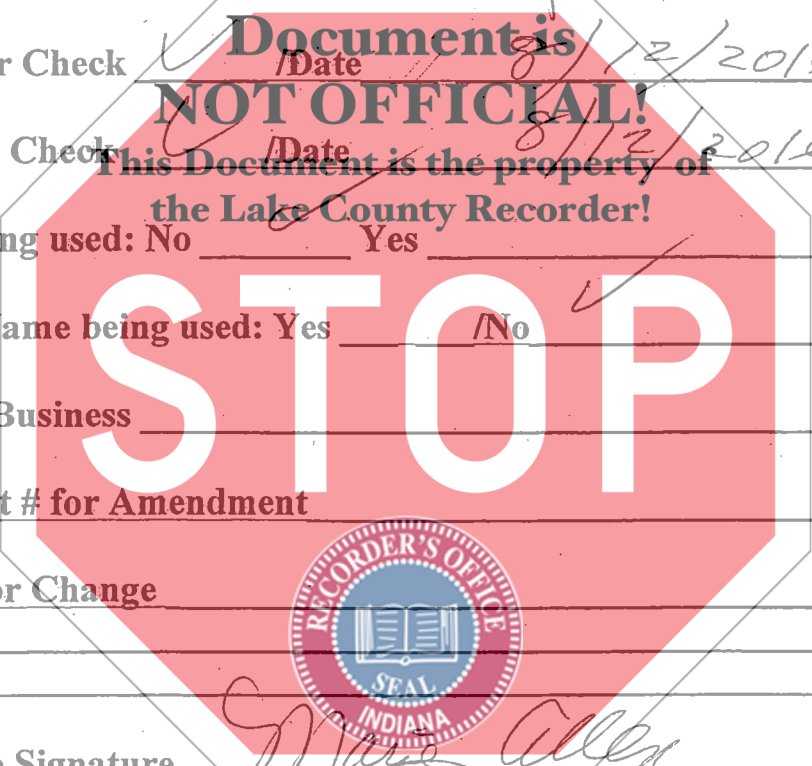
Document # for Amendment _____

Reason for Change _____

Employee Signature Maria Allen

Customer Signature [Signature]

Customer Printed Name Loree Smith



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
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Customer performed their own search and results are entirely up to the individual. Our office is here to assist the customer.

Please note that our office does not certify the accuracy of this document and do not consent to the reliance by any party on this or any information provided by the Lake County Recorder. You may also contact the Secretary of State Office in Indianapolis for further clarification.