

NOT AN OFFICIAL DOCUMENT



INFORMATION REQUEST
State Form 55241 (4-13)

GINA PIMENTEL
RECORDER **2023-007631**
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
8:34 AM 2023 Mar 16

FOLLOW INSTRUCTIONS.

A. NAME & PHONE OF CONTACT AT FILER (optional) FILING OFFICE ACCT #
KAREN 219-680-0066

B. E-MAIL CONTACT AT FILER (optional)

C. RETURN TO: (Name and Address)
THE PAPER CHASE OF NORTHWEST INDIANA INC

GINA PIMENTEL
RECORDER **2023-009200**
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2:44 PM 2023 Mar 24

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY.

1. DEBTOR'S NAME to be searched: Provide only one Debtor name (1a or 1b) (Use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name.)

1a. ORGANIZATION'S NAME
4-S ERECTION, INC

OR

1b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S) SUFFIX

2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include the Debtor name identified in item 1:

2a. SEARCH RESPONSE CERTIFIED (Optional)
 Select one of the following two options: ALL (Check this box to request a response that is complete, including filings that have lapsed.) UNLAPSED

2b. COPY REQUEST CERTIFIED (Optional)
 Select one of the following two options: ALL UNLAPSED

2c. SPECIFIED COPIES ONLY CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)

3. ADDITIONAL SERVICES:

THROUGH DATE:

nothing on file as of 10/31/20.

Amended to change Effective Through Date.

N/C

4. DELIVERY INSTRUCTIONS (Request will be completed and mailed to the address shown in item C unless otherwise instructed here.)

4a. Pick Up
 4b. Other

Specify desired method here (if available from this office), provide delivery information (e.g., delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)