DOC ID ----> 200417402552

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
06/24/2004	200417402552	TRADE NAME RENEWAL (RNR)	25.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

CAROL JUNIEWICZ
19635 RIVERVIEW AVE.
CLEVELAND, OH 44116

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, J. Kenneth Blackwell

RN124479

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

POUR VOUS

and, that said business records show the filing and recording of:

Document(s)
TRADE NAME RENEWAL

Document No(s):
200417402552

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 22nd day of June, A.D. 2004.

J. Kenneth Blackwell

Ohio Secretary of State

DOC ID ----> 200417402552

Prescribed by
J. KENNETH BLACKWELL, Secretary of State
30 East Broad Street, Lower Level
Columbus, Ohio 43266-0418

RENEWAL OF TRADE NAME REGISTRATION

2004 JUN 22 AM 9:15

1. The Registration Number to be renewed is: **RN124479**

2. The trade name to be renewed is:
POUR VOUS

3. The date of original registration is: **August/ 7/1989**

4. The applicant is: (check appropiate item)
   - ✓ an individual
   - ___ an Ohio corporation, Charter Number: _____
   - ___ a foreign corporation, incorporated in the state of: _____
   - ___ a General Partnership
   - ___ a Limited Liability Company
   - ___ a Limited Partnership; County in Ohio where certificate /application of limited partnership is filed is: _____
   - ___ a Professional association
   - ___ an association
   - ___ a Society, Foundation, Federation or other organization

5. The name of the applicant designated in item 4 is:
CAROL ANN JUNIEWICZ
(Note: When the applicant is a partnership, the name of the partnership must appear on this line)

6. The business address of the applicant is:
19635 RIVERVIEW AVE.
(Street address only, P.O. Box not acceptable)
ROCKY RIVER, CUYAHOGA, OHIO, 44116
(City, Village or Township) (County) (State) (Zip Code)

7. Complete only if applicant is a partnership:

Names of All General Partners	Complete Residence Address

This document is signed by a corporate officer, general partner, association member or officer, or the individual appplicant.

By: Carol Ann Juniewicz