

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 2/10/2022 3:17 PM Fee Receipt: \$20.00

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

Certificate of Withdrawal of Assumed Name (Domestic or Foreign Business Entity)

**CWA** 

www.sos.ky.gov				
Pursuant to the provisions of KRS submits the following statements	S 365, the undersigne :	d applicant applies to withdra	aw an assumed name a	and, for that purpose,
The assumed name to be with				<u> </u>
	_	st be identical to the name on rec	•	tate.)
2. The assumed name has been	discontinued by	Iglass Boulevard Christing the the exact name of the entity or		
3. This application will be effective	•		<b>F</b>	
4. The date the original certificate	. •	20		
5. The "real name" is (you must ch			<del></del>	
a Domestic General Part	a Foreign Ger	a Foreign General Partnership		
a Domestic Limited Liabi	<del></del>	a Foreign Limited Liability Partnership		
a Domestic Limited Partr	•	a Foreign Limited Partnership		
a Domestic Business Tru	a Foreign Bus	a Foreign Business Trust		
X a Domestic Corporation a Foreign Corporation				
a Domestic Limited Liabi	<del></del>	a Foreign Limited Liability Company		
6. The mailing address is:			, , ,	
2005 Douglass Boulevard	Le	ouisville	KY	40205
Street Address or Post Office Box Nun	nbers	City	State	Zip
I declare under penalty of perjury	under the laws of Ke	ntucky that the forgoing is tru	e and correct.	
I. Chris S	Fanders	J. Chris Sanders	Attorney	1/5/2022
Signature of Authorized Party		Printed Name	Title	Date