

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

0047516.09

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Michael G. Adams Kentucky Secretary of State Received and Filed: 1/27/2021 1:30 PM Fee Receipt: \$20.00

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assumed Name (Domestic or Foreign Business Entity) ASN		
following statement:	S 365, the undersigned applies to a	ssume a name and, for the	at purpose, submits the
The assumed name is: The	Speed Art Museum		•
2. The name of the business enti	ty (and in the case of general partr	ership, the partners) that i	s/are adopting the assumed
name:			
J.B. Speed Art Museun			
Name must be identical to the nam	e on record with the Secretary of St	ate.)	
3. The "real name" is (you must ch	•		
	a Domestic General Partnershipa Foreign General Partnership		
a Domestic Limited Liability Partnership			
a Domestic Limited Partnership a Foreign Limited Partnership			•
a Domestic Business Trust			
a Domestic Corporation (Non-Profit)			
a Domestic Limited Liability Company a Foreign Limited Liability Company			
a Domestic Statutory Trust a Foreign Statutory Trust			
a Domestic Limited Cooperative Associationa Foreign Limited Cooperative Associat			•
a Domestic Uninco	rporated Non-profit Association	a Foreign Unincorpo	orated Non-profit Association
4. The business is organized and	existing in the state or country of _	United States of Ame	erica
5. The mailing address is:			
2035 South Third Street	Louisvil	le KY	40208
Street Address or Post Office Box	Numbers Cit	y State	z Zip
I declare under penalty of perjury	under the laws of Kentucky that the	e forgoing is true and corre	ect.
Tina Allison Authorized Party Signature	Tina Allison Printed Name	Controller	Jan 11, 2021
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