vmiller ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 8/30/2021 2:17 PM Fee Receipt: \$20.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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	
Pursuant to the provisions of KRS following statement: 1. The assumed name is:Arch	•		•	• •
 The name of the business entitioname: SCI Kentucky Funeral S 		artnership, the pai	rtners) that Is/ar	e adopting the assumed
Name must be identical to the name		of State.)		
a Domestic Limited Liability Partnership a Domestic Limited Partnership a Domestic Business Trust a Domestic Corporation a Domestic Limited Liability Company a Domestic Statutory Trust a Domestic Limited Cooperative Association a Fo			a Foreign General Partnership a Foreign Limited Liability Partnership a Foreign Limited Partnership a Foreign Business Trust a Foreign Corporation a Foreign Limited Liability Company a Foreign Statutory Trust a Foreign Limited Cooperative Association a Foreign Unincorporated Non-profit Association ucky, USA	
1929 Allen Parkway	Hou	ston	TX	77019
Street Address or Post Office Box N	lumbers	City	State	Zip
declare under penalty of perjury to	inder the laws of Kentucky tha Daniel Kleban	• -		8/25/2021
Authorized Party Signature	Printed Name	Ti	tie	Date