



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

**0154155.09** kdcoleman  
ASN  
**Michael G. Adams**  
**Kentucky Secretary of State**  
 Received and Filed:  
 3/14/2022 10:12 AM  
 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**

Pursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is: Pasqually's Pizza and Wings

2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:

CEC Entertainment, LLC

Name must be identical to the name on record with the Secretary of State.)

3. The "real name" is (you must check one):

- |                                                                           |                                                                          |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> a Domestic General Partnership                   | <input type="checkbox"/> a Foreign General Partnership                   |
| <input type="checkbox"/> a Domestic Limited Liability Partnership         | <input type="checkbox"/> a Foreign Limited Liability Partnership         |
| <input type="checkbox"/> a Domestic Limited Partnership                   | <input type="checkbox"/> a Foreign Limited Partnership                   |
| <input type="checkbox"/> a Domestic Business Trust                        | <input type="checkbox"/> a Foreign Business Trust                        |
| <input type="checkbox"/> a Domestic Corporation                           | <input type="checkbox"/> a Foreign Corporation                           |
| <input type="checkbox"/> a Domestic Limited Liability Company             | <input checked="" type="checkbox"/> a Foreign Limited Liability Company  |
| <input type="checkbox"/> a Domestic Statutory Trust                       | <input type="checkbox"/> a Foreign Statutory Trust                       |
| <input type="checkbox"/> a Domestic Limited Cooperative Association       | <input type="checkbox"/> a Foreign Limited Cooperative Association       |
| <input type="checkbox"/> a Domestic Unincorporated Non-profit Association | <input type="checkbox"/> a Foreign Unincorporated Non-profit Association |

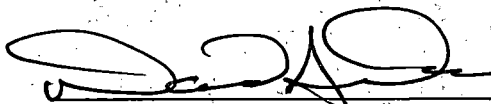
4. The business is organized and existing in the state or country of Texas

5. The mailing address is:

1707 Market Place Blvd. Suite 200                      Irving                      Texas                      75063

**Street Address or Post Office Box Numbers**                      **City**                      **State**                      **Zip**

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

 David Deck                      VP                      2/07/2022  
**Authorized Party Signature**                      **Printed Name**                      **Title**                      **Date**