## 0143088.07

**AMcRay** A272

Kentucky Secretary of State
Received and Filed
O1/14/2008 8:24

Trey Grayson 01/14/2008 8:24:11 AM

Fee Receipt: \$20.00

Division of Corporations BUSINESS FILINGS	Amended Certificate of Assumed Name	AAN
P.O. Box 718 Frankfort, KY 40602 (502) 564-2848		
http://www.sos.ky.gov/		
This certifies that the assumed name of:    This certifies that the assumed name of:   Name of the control of the certifies that the assumed name of the certifies that the certifies that the certifies that the certifies that the certifies t	record with the Secretary of State)	7
has been amended to revise the real name of	of the partners or business organization hold  ANA CAR A CRAW F  ne - KRS 365.015(1)]	~ A //
The certificate of assumed name was filed w	with the Secretary of State on: $\frac{12}{1}$	7/1979
The current principal office address is:  Street Address, if any	AVANUE Louisville K	7. 4CD 15 Zip Code
The principal office address is hereby chang	ed to:	
Street Address, if any	City State	e Zip Code
	a delayed effective date and/or time is specifi	ed:
The changes in the identity of the partners a	re as follows: 10 VOVO C. CAL	J FURD ANY
CARIA R. CRAWI	50Rd	·
,		,
The amended certificate of assumed name	Sexecuted by:  Arlá  (	han ord
DAND C. CANFILD	(Signature)	2. Conversel
(type of Frint Name)	(Type or Print Name	) B
/ 'Date	Ωate /	

Instructions:

Submit this form with one (1) exact or conformed copy. The filing fee is \$20.00. Please make your check payable to the "Kentucky State Treasurer".