# **Commonwealth of Kentucky** Michael G. Adams, Secretary of St Ky Secretary of State

0791600 Michael G. Adams Received and Filed

4/11/2023 11:59:08 AM Fee receipt: \$20.00

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Certificate of Withdrawal of **Assumed Name**

**CWA** 

35608045

Pursuant to the provisions of KRS 365.015(5), the undersigned applicant applies to withdraw an assumed name, and for that purpose, submits the following statements:

1. The assumed name to be withdrawn is:

#### RADICALLY ROOTED

2. The assumed name has been discontinued by:

### **SOLID ROOTS YOGA, LLC**

3. The date the origional certificate was filed:

Tuesday, January 15, 2019

The mailing address is: 4.

#### 4750 HEARTLAND PARKWAY, LEXINGTON KY 40515

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true 5. and correct.

**Thomas Hehl** 

4/11/2023