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

Certificate of Assumed Name

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:

laurel medcan dispensary

2. The name of the business entity that is adopting the assumed name:

RIKIAAN MEDCAN, LLC

- 3. The entity is organized and existing in the state or country of KY
- 4. The mailing address is:

711 east laurel rd, London KY 40744

This filing will be effective on Tuesday, August 20, 2024.

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

Signature of individual signing on behalf of **Authorized Party: ashvinkumar patel** 8/20/2024 11:55:30 AM C226

ASN

8/20/2024 11:55:30 AM

1388000.06

Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$20