# 1306501

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

Michael G. Adams Received and Filed

9/13/2023 7:20:04 PM 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 Assumed Name**

ASN

Pursuant to the provisions of KRS 365.015, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

### LIQUIFIED LIGHT SHOW

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

### LIQUIFIED COLLECTIVE LLC

- This application will be effective upon filing. 3.
- The mailing address is: 4.

### 1182 Octavian Way, Lexington KY 40517

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

> **Brittani Fuller Managing Member** 9/13/2023