# Commonwealth of Kentucky Michael G. Adams, Secretary of St

0415804 Michael G. Adams KY Secretary of State Received and Filed 3/6/2023 2:37:43 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** 

16852874

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

1. The assumed name is:

### **HOMETOWN RX**

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

# AMERICA'S #1 HEALTH STORE, INC.

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

#### 1913 SOUTH MAIN, MADISONVILLE KY 42431

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

Jerry L Rickard president 3/6/2023