

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

0744609.07

mmoore RNA

Michael G. Adams Kentucky Secretary of State Received and Filed:

9/12/2024 3:32 PM Fee Receipt: \$20.00

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Renewal of Assumed Name (Domestic or Foreign Business Entity)		RAN	
Pursuant to the provisions of KR the following statements:	.S 365, the undersigned applie	s to renew an assumed n	ame and, f	for that purpose, submits
This certifies that the assume     SS HALCOMB FARMS		is:		
2. The assumed name is being Samuel Faulconer Halcon (The "real name" of entity or partne	mb and Stephanie Rae H	alcomb		
3. The "real name" is (you must compared to a Domestic Limited Liab a Domestic Limited Part a Domestic Business Transport a Domestic Corporation a Domestic Limited Liab a Domestic Statutory Transport a Domestic Limited Cool a Domestic Unincorporation and Domes	check one): rtnership collity Partnership cust collity Company cust coperative Association cated Non-profit Association cated and existing in the state or		Liability Pa Partnership S Trust Lion Liability Co Trust Cooperative	rtnership
<ol> <li>The mailing address of the but</li> <li>343 Sulphur Springs Road</li> </ol>	0 V · 000	irville	KY	42202
Street Address or Post Office Box Nu		in vine	State	Zip
I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.				
Signature of Authorized Party	Printer	phanie Halcomle	2	9/12/24