#### 35127247

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

0918009 Michael G. Adams Received and Filed 9/6/2022 5:17:35 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 Withdrawal of **Assumed Name**

**CWA** 

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 The assumed name to be withdrawn is:

### SALONLOUISVILLE.COM

2. The assumed name has been discontinued by:

### NKH, LLC

The date the origional certificate was filed: 3.

Thursday, March 31, 2022

4. The mailing address is:

#### 304 WHITTINGTON PARKWAY, SUITE 107, LOUISVILLE KY 40222

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

Kyle L Henderman

9/6/2022