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

1058110 Michael G. Adams Received and Filed

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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

18158296

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:

# NORTH CENTRAL TRAINING GROUP 04 (TGNC04)

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

## CENTRAL KENTUCKY TRAINING CONTINGENT - NSCC LTD.

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

#### 801 ORCHARD DR, NICHOLASVILLE KY 40356

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

> William Clark **Director** 3/18/2024