#### 50436975

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

1287310 Michael G. Adams Received and Filed

4/16/2024 9:46:06 AM 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 The assumed name to be withdrawn is:

### THAT 1 PAINTER LOUISVILLE

2. The assumed name has been discontinued by:

### Asunto, LLC

3. The date the origional certificate was filed:

Friday, June 30, 2023

The mailing address is: 4.

#### 11009 Greenock Ct, Louisville KY 40243

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

**Aaron White** 

4/16/2024