## 41366104

# **Commonwealth of Kentucky** Michael G. Adams, Secretary of Sti KY Secretary of State

1029711 Michael G. Adams Received and Filed

10/28/2020 7:42:15 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 Assumed Name**

ASN

Pursuant to the provisions of KRS chapter 365, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

#### **Extreme Loans**

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

### First Savings Bank Inc.

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

#### 702 N Shore Dr Ste 300, Jeffersonville IN 47130

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

Larry C. Tomlin, Esq.