

**Commonwealth of Kentucky  
Michael G. Adams, Secretary of State**

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1365612.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
5/17/2024 12:00:00 AM  
Fee receipt: \$40

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 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is:

**COOPER PLANS**

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

**COOPER LAW LLC**

3. The business is organized and existing in the state or country of **KY**

4. The mailing address is:

**10200 Forest Green Blvd, Suite 112, Louisville KY 40223**

This application will be effective on **Friday, May 17, 2024**.

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

**Allison Cooper**  
Organizer  
5/17/2024