



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

0063013.06 mmoore
ASN
Michael G. Adams
Kentucky Secretary of State
Received and Filed:
4/19/2024 2:43 PM
Fee Receipt: \$20.00

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assumed Name (Domestic or Foreign Business Entity)	ASN
--	--	------------

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

- The assumed name is: Rejuvenated Strategies Group
- The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:
Ameriprise Financial Services, LLC

Name must be identical to the name on record with the Secretary of State.)

- The "real name" is (you must check one):

a Domestic General Partnership	a Foreign General Partnership
a Domestic Limited Liability Partnership	a Foreign Limited Liability Partnership
a Domestic Limited Partnership	a Foreign Limited Partnership
a Domestic Business Trust	a Foreign Business Trust
a Domestic Corporation	a Foreign Corporation
a Domestic Limited Liability Company	<input checked="" type="checkbox"/> a Foreign Limited Liability Company
a Domestic Statutory Trust	a Foreign Statutory Trust
a Domestic Limited Cooperative Association	a Foreign Limited Cooperative Association
a Domestic Unincorporated Non-profit Association	a Foreign Unincorporated Non-profit Association

4. The business is organized and existing in the state or country of Delaware

5. The mailing address is:

<u>707 2nd Ave S.</u>	<u>Minneapolis</u>	<u>MN</u>	<u>55474</u>
Street Address or Post Office Box Numbers	City	State	Zip

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

	<u>Stephanie Mitchell</u>	<u>Authorized Person</u>	<u>04/18/2024</u>
Authorized Party Signature	Printed Name	Title	Date