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Michael G. Adams Kentucky Secretary of State Received and Filed: 4/14/2025 3:54 PM Fee Receipt: \$20.00

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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

mmoore

ASN

	ursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the llowing statement:
1.	The assumed name is: CS Properties, LLC
2.	The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed
	name:
С	S Properties, L.L.C.
Na	me must be identical to the name on record with the Secretary of State.)
3.	The "real name" is (you must check one):

0.	Ine	real fiance 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	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		
Δ	The	ousiness is organized and existing in the state or country c	Kentucky		
4.	men	ousiness is organized and existing in the state or country o			
5.	. The mailing address is:				

2417 Regency Rd., Suite D	Lexington	KY	40503
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.

William Code Shees Authorized Party Signature	William Cody Sheeran	Member	April <u>10</u> , 2025
Authorized Party Signature	Printed Name	Title	Date