

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

Alison Lundergan Grimes  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
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**Certificate of Assumed Name**

**ASN**

27621317  
0935816  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
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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:

**POP! Theatre Education**

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

**POP! Education, LLC**

3. This application will be effective upon filing.

4. The mailing address is:

**13 S Street NE, Suite A, Washington DC 20002**

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

**James Edward Jordan Campbell, Authorized Rep 6/6/2016**