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Commonwealth of Kentucky

Option

Opti

Michael G. Adams KY Secretary of State Received and Filed 2/27/2020 1:22:40 PM

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:

SHREEJI MINI MART

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

Shree Nilkanth Inc

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

369 Hogwallow Ln, Vine Grove KY 40175

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

NIKESH PATEL