

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1235917.09

Fee Receipt: \$20.00

mmoore **ASN**

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 2/27/2023 2:56 PM

Division of Business Filings ASN Certificate of Assumed Name **Business Filings** (Domestic or Foreign Business Entity) P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 365.015, the undersigned applies to assume a name and, for that purpose, submits the following statement: 1. The assumed name is: Tolmar Pharmaceuticals 2. The real name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name: Tolmar, Inc. Name must be identical to the real name on record with the Secretary of State.) The entity type is (you must check one): a Domestic General Partnership a Foreign General Partnership a Foreign Limited Liability Partnership a Domestic Limited Liability Partnership a Domestic Limited Partnership a Foreign Limited Partnership a Foreign Business Trust a Domestic Business Trust X a Foreign Corporation a Domestic 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 The entity is organized and existing in the state or country of Delaware 5. The mailing address is: 701 Centre Avenue Fort Collins CO 80526 Street Address or Post Office Box Numbers City State I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct. 02-|23 |2023 Date

Printed Name

Assistant Secretary Title