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

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

1. The assumed name is:

DONGAR FOOD MART & DELI #0534

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

## SWAMIBAPA FOOD, LLC

- 3. The entity is organized and existing in the state or country of KY
- 4. The mailing address is:

## 1401 LEXINGTON RD, LOUISVILLE KY 40206

This application will be effective on Wednesday, July 3, 2024.

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

Signature of individual signing on behalf of **MEMBER: KAJALBEN PATEL** 

7/3/2024 12:50:55 PM

ASN

7/3/2024 12:50:55 PM

0772818.06 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$20