Commonwealth of Kentucky Michael G. Adams, Secretary of St Ky Secretary of State

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1272618 Michael G. Adams Received and Filed

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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 365.015, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

NSURANCE4YOU, LLC

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

CHANDLER INSURANCE GROUP, LLC

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

16207 EASTWOOD CUT-OFF ROAD #230, EASTWOOD KY 40018

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

> **Lamont Chandler** Member 6/5/2023