

**Commonwealth of Kentucky
Michael G. Adams, Secretary of State**

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
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<http://www.sos.ky.gov>

Certificate of Assumed Name

ASN

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:

MASCONIC

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

H&B Personal Protection, LLC

3. The entity is organized and existing in the state or country of **KY**

4. The mailing address is:

800 West Main Street, Louisville KY 40202

This filing will be effective on **Tuesday, April 15, 2025.**

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 **Legal Assistant:**

Charles W. Paige

4/15/2025 2:01:18 PM