

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

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1231120  
Michael G. Adams  
KY Secretary of State  
Received and Filed

9/13/2023 5:54:53 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 365.015, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

**COUNTY LINE CAR SALES**

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

**Crawford Restoration LLC**

3. This application will be effective upon filing.

4. The mailing address is:

**4603 Johanna Ct, Louisville KY 40229**

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

**Jon Crawford**

**Owner**

9/13/2023