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:

H.E.AL. RECOVERY

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

HOUSE OF EMILY ALICE & LOUISE LLC

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

1800 w Muhammad Ali blvd are 2c, Louisville KY 40203

This filing will be effective on Tuesday, February 11, 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 Owner: Nasira Mah-Jabeen

2/11/2025 11:31:17 PM

C226

1366420.06 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$20

2/11/2025 11:31:17 PM

ASN