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Michael G. Adams Kentucky Secretary of State

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## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assumed Name (Domestic or Foreign Business Entity)  ASN		
following statement:	365, the undersigned applies to assu	ume a name and, for that p	surpose, submits the
1. The assumed name is:	Partners		
2. The name of the business entit	ty (and in the case of general partners	ship, the partners) that is/a	re adopting the assumed
name:			
Specialty Distribution Group, LLC			
	e on record with the Secretary of State	.)	
3. The "real name" is (you must che	eck one):		
a Domestic Genera		a Foreign General Partnership	
a Domestic Limited Liability Partnership		a Foreign Limited Liability Partnership	
a Domestic Limited Partnership		a Foreign Limited Partnership	
a Domestic Business Trust		a Foreign Business Trust	
a Domestic Corporation		a Foreign Corporation	
a Domestic Limited Liability Company		a Foreign Limited Liability Company	
a Domestic Statutory Trust		a Foreign Statutory Trust	
a Domestic Limited Cooperative Association		a Foreign Limited Cooperative Association	
a Domestic Unincorporated Non-profit Association		a Foreign Unincorporated Non-profit Association	
4. The business is organized and	I existing in the state or country of $\frac{\mathrm{Vi}}{\mathrm{I}}$	rginia	
5. The mailing address is:			
475 North Williamson Boulevard	Daytona Beach	FL	32114
Street Address or Post Office Box	Numbers City	State	Zip
I declare under penalty of perjury	under the laws of Kentucky that the for	orgoing is true and correct.  President and Treasurer	June 12,2024
Authorized Party Signature	Printed Name	Title	Date