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mmoore ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 3/5/2024 10:57 AM Fee Receipt: \$20.00



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:	RS 365, the undersigned applies to as	sume a name and, for that purp	oose, submits the
 The assumed name is: 			
The name of the business er name: NSM Services Private Limited	ntity (and in the case of general partne	ership, the partners) that is/are	adopting the assumed
	me on record with the Secretary of Sta	te.)	
3. The "real name" is (you must check one): a Domestic General Partnership a Domestic Limited Liability Partnership a Domestic Limited Partnership a Domestic Business Trust a Domestic Corporation a Domestic Limited Liability Company a Domestic Statutory Trust a Domestic Limited Cooperative Association a Domestic Unincorporated Non-profit Association		a Foreign General Partnership a Foreign Limited Liability Partnership a Foreign Limited Partnership a Foreign Business Trust ✓ a Foreign Corporation a Foreign Limited Liability Company a Foreign Statutory Trust a Foreign Limited Cooperative Association a Foreign Unincorporated Non-profit Association	
4. The business is organized a	nd existing in the state or country of _	Tiula	
5. The mailing address is:			
DLF SEZ IT Park, Floor 6, Blo Street Address or Post Office Bo	ck 1A Mount Poonamalle Road, Man ox Numbers City	apakkam, Chennai, Tamil Nadu / State	, India, 600089 Zip
I declare under penalty of perju	ry under the laws of Kentucky that the	e forgoing is true and correct.	
111 -	Kurt G. Johnson	Executive VP/CFO	
Authorized Party Signature	Printed Name	Title	Date