# **Commonwealth of Kentucky**

28673881

1272032 Michael G. Adams Michael G. Adams, Secretary of St. KY Secretary of State Received and Filed

> 4/29/2024 4:06:31 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:

#### ANITA'S SHINE SERVICE

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

# **SPLENDID 100 LLC**

- This application will be effective upon filing. 3.
- The mailing address is: 4.

## 1405 STEADMANTOWN LN APT 9, FRANKFORT KY 40601

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

> Albertina Ramazani Albertina Ramazani 4/29/2024