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Michael G. Adams Kentucky Secretary of State Received and Filed: 5/31/2023 12:00 AM Fee Receipt: \$20.00

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

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490

**Amended Certificate of Assumed Name** 

**AAN** 

(Domestic or Foreign Business Entity)

www.sos.ky.gov Filing Fee: \$20				
Pursuant to the provisions of KRS 3 purpose, submits the following state		olies to amend the cer	tificate of assumed nam	ne and, for that
1. The assumed name is <b>Cross</b>	dock Develop	ment	with the Secretary of State.	<u> </u>
O. The contificate of account of account	•		-	)
2. The certificate of assumed name		etary of State on: 1 to s	<del></del>	
<ol> <li>The current principal office address</li> <li>2404 Belknap Beach</li> </ol>		rospect	Kentucky	40059
Street Address or Post Office Box Numbe		<del> </del>	State	Zip
4. The principal office address is he	_		Ventuelar	40050
P.O. Box 827 Street Address or Post Office Box Numbe		rospect	Kentucky State	40059 Zip
5. The current real name is6. The real name is hereby changed	d to(The real name must be o		with the Secretary of State.  records of the Secretary of . KRS 14A.3-010 (1))	
7. The changes in the identity of the	partners are as follows	:		
declare under penalty of perjury un		y that the forgoing is t	rue and correct.	5/20/2
Signature of Applicant	Printed Name	-	Title	Date 🗀