

**Commonwealth of Kentucky  
Michael G. Adams, Secretary of State**

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Michael G. Adams  
Secretary of State  
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Secretary of State  
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**Certificate of Assumed Name**

**ASN**

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:

**FOXYS**

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

**FOXY, INC.**

3. The business is organized and existing in the state or country of **KY**

4. The mailing address is:

**1715 BERRY BLVD, LOUISVILLE IN 47129**

This application will be effective on **Wednesday, May 22, 2024.**

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

**Milford Renfrow**  
Secretary Treasurer  
5/22/2024