# Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes
KY Secretary of State
Received and Filed

2/26/2018 2:49:27 PM Fee receipt: \$20.00

Alison Lundergan Grimes 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 chapter 365, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

## Sharky's Snack Shack

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

## Cakes & Cones Ice Cream and Bake shop LLC

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

#### 1215 Summerlake Dr. Alexandria KY 41001

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

Tiffany Musak, Authorized Rep 2/26/2018