Kentucky Secretary of State Received and Filed: 5/2/2023 10:38 AM Fee Receipt: \$20.00

mmoore ASN



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 N (Domestic or Foreign Busines		ASN
Pursuant to the provisions of KRS following statement: 1. The assumed name is:	Electric Supply	assume a name and, for th	at purpose, submits the
2. The name of the business entir name: Consolidated Electrical Distributors,	Inc.		is/are adopting the assumed
Name must be identical to the name	· · · · · · · · · · · · · · · · · · ·	ate.)	
 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 4. The business is organized and existing in the state or country of Description Description 		 a Foreign General Partnership a Foreign Limited Liability Partnership a Foreign Limited Partnership a Foreign Business Trust X a Foreign Corporation a Foreign Limited Liability Company a Foreign Statutory Trust a Foreign Limited Cooperative Association a Foreign Unincorporated Non-profit Association 	
1920 Westridge Drive	Irving	ТХ	75038
Street Address or Post Office Box I	_		<u>.</u>
I declare under penalty of perjury Authorized Party Signature			