REVIEWED
By tamsin.wade at 9:13 am, 10/4/23



1004838.06 ASN Michael G. Adams Kentucky Secretary of State Received and Filed: 10/4/2023 9:21 AM Fee Receipt: \$20.00

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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 Na (Domestic or Foreign Business	ASN	
following statement:	S 365, the undersigned applies to as A Joe Young Insura		at purpose, submits the
name: DPD Holdings, I	ity (and in the case of general partne _LC ne on record with the Secretary of Sta		s/are adopting the assumed
3. The "real name" is (you must ch a Domestic Genera a Domestic Limited a Domestic Limited a Domestic Busine a Domestic Corpor a Domestic Limited a Domestic Statuto a Domestic Statuto	eck one): al Partnership I Liability Partnership I Partnership ss Trust ation I Liability Company ory Trust I Cooperative Association rporated Non-profit Association	a Foreign General F a Foreign Limited Li a Foreign Limited P a Foreign Business a Foreign Corporati a Foreign Limited Li a Foreign Statutory a Foreign Limited C a Foreign Unincorpo	ability Partnership artnership Trust on ability Company
 The business is organized and The mailing address is: 	l existing in the state or country of _	Kentucky	·
132 S Lake Dr, Ste 101	Prestonsbur	g Ky	41653
Street Address or Post Office Box	Numbers City	State	e Zip
I declare under penalty of perjury	under the laws of Kentucky that the	forgoing is true and corre	ect.
Chillip, Mun	🥢 Phillip D Hui	nt Partner	09/28/2023
Authorized Party Signature	Printed Name	Title	Date