# Commonwealth of Kentucky Michael G. Adams, Secretary of St.

1078938 Michael G. Adams KY Secretary of State Received and Filed

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Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

### **Certificate of Assumed Name**

**ASN** 

61802871

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:

#### **Shade Tree Homes**

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

## **Praxis Properties, L.L.C.**

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

#### 55 Woodlawn Ave, Fort Mitchell KY 41017

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

**Andrew Hill**