

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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0262039.09  
Michael G. Adams  
Secretary of State  
Received and Filed  
1/30/2025 1:29:08 PM  
Fee receipt: \$20

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

**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:

**RSI CALF SYSTEMS**

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

**RIVERSIDE PLASTICS, INC.**

3. The entity is organized and existing in the state or country of **OH**

4. The mailing address is:

**P O BOX 421, FLEMINGSBURG KY 41041**

This filing will be effective on **Thursday, January 30, 2025.**

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

Signature of individual signing on behalf of **Pres: C. Schwartz**  
1/30/2025 1:29:08 PM