COMMONWEALTH OF KENTUCKY
MICHAEL ADAMS, SECRETARY OF STATE

Division of Business Filings
P.O. Box 718,
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Certificate of Assumed Name
(Domestic or Foreign Business Entity)

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: CTS Builders .

2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:

CHA TECH SERVICES LLC

Name must be identical to the name on record with the Secretary of State.)

3. The "real name" is (you must check one):

☐ a Domestic General Partnership	☐ a Foreign General Partnership	
☐ a Domestic Limited Liability Partnership	☐ a Foreign Limited Liability Partnership	
☐ a Domestic Limited Partnership	☐ a Foreign Limited Partnership	
☐ a Domestic Business Trust	☐ a Foreign Business Trust	
☐ a Domestic Corporation	☐ a Foreign Corporation	
☐ a Domestic Limited Liability Company	☒ a Foreign Limited Liability Company	
☐ a Domestic Statutory Trust	☐ a Foreign Statutory Trust	
☐ a Domestic Limited Cooperative Association	☐ a Foreign Limited Cooperative Association	
☐ a Domestic Unincorporated Non-profit Association	☐ a Foreign Unincorporated Non-profit Association	

4. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective cannot be prior to the date the application is filed. The effective date is_____.

5. The business is organized and existing in the state or country of New York .

6. The mailing address is:

45 Main Street, Ste. 526	Brooklyn	NY	11201
Street Address or Post Office Box Numbers	City	State	Zip

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

	Ben Igoe	Member	07/26/2022
Authorized Party Signature	Printed Name	Title	Date

(1/20)