

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

C226

0202344.09
Michael G. Adams
Secretary of State
Received and Filed
6/14/2024 12:50:26 PM
Fee receipt: \$20

Michael G. Adams
Secretary of State
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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:

THE MEDICINE SHOPPE

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

THE MEDICINE SHOPPE OF SOMERSET, INC.

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

4. The mailing address is:

900 EAST MT. VERNON ST., SOMERSET KY 42501

This application will be effective on **Friday, June 14, 2024.**

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 **PRESIDENT:**

SAIBABU APPALANENI

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