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Michael G. Adams **Kentucky Secretary of State** Received and Filed: 9/8/2022 10:42 AM Fee Receipt: \$20.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STA

Division of Business Filings Business Filings

Certificate of Assumed Name

ASN

Authorized Party Signature	Printed Name		Title	Date	
Charles R. Brown 11	Charles R.	Brown II	Chief Financial Office	r 9/6/22	
declare under penalty of perjury	under the laws of Ken	tucky that the fo	orgoing is true and correc	t.	
Street Address or Post Office Box Nun		City	State	Zip	
2600 Network Bouleva	ard, Suite 600	Frisco	Texas	75034	
6. The mailing address is:		-			
5. The business is organized and	d existing in the state o	or country of Dela	ware	(Delayed effective date and/or time)	
4. This application will be effection the delayed effective cannot be				is	
a Domestic Limited Liability Company		a Foreign Limited Liability Company			
a Domestic Corporation		a Foreign Corporation			
a Domestic Business Trust		a Foreign Business Trust			
a Domestic Limited Partnership		a	a Foreign Limited Partnership		
a Domestic Limited Liability Partnership		a	a Foreign Limited Liability Partnership		
a Domestic General Partnership		a	a Foreign General Partnership		
3. The "real name" is (you must ch	neck one):				
Name must be identical to the name or	n record with the Secretary	of State.)			
name: Northwest Hardwo		gorrorar pararion	srip, and paraners, and is	are adopting the accumen	
2. The name of the business ent		neneral partner	shin the partners) that is/	are adopting the assumed	
1. The assumed name is: $\frac{NW}{N}$	H				
Pursuant to the provisions of KRS following statement:	S 365, the undersigned	l applies to ass	ume a name and, for that	purpose, submits the	
Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	,	reign Busine	,		