

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

49361939

1036644  
Michael G. Adams  
KY Secretary of State  
Received and Filed

12/16/2022 3:42:24 PM

Fee receipt: \$20.00

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**

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:

**Gina Scarpino Psychic Medium & Spiritual Life Coach**

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

**GINA SCARPINO SALON & SPIRIT LLC**

3. This application will be effective upon filing.

4. The mailing address is:

**11604 MAIN ST, LOUISVILLE KY 40243**

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

**Gina Scarpino**