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Michael G. Adams Kentucky Secretary of State Received and Filed: 5/26/2023 2:52 PM Fee Receipt: \$20.00

mmoore ASN

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assumed N (Domestic or Foreign Busines	ASN				
Pursuant to the provisions of KRS following statement:	365, the undersigned applies to a	ssum	e a name and, for that p	urpose, submi	its the	
1. The assumed name is:	gix					
2. The name of the business enti	ty (and in the case of general partr	nershi	p, the partners) that is/ar	e adopting the	e assume	;d
name: GC SERVICES LIMITED PARTN	ERSHIP-DELAWARE					
Name must be identical to the nam	e on record with the Secretary of St	ate.)				
a Domestic Limited a Domestic Busine a Domestic Corpor a Domestic Limited a Domestic Statuto a Domestic Limited a Domestic Uninco	al Partnership I Liability Partnership I Partnership ss Trust ation I Liability Company		a Foreign General Part a Foreign Limited Liabil a Foreign Limited Partn a Foreign Business Tru a Foreign Corporation a Foreign Limited Liabil a Foreign Statutory Tru a Foreign Limited Coop a Foreign Unincorporat	lity Partnership ership est lity Company st perative Assoc	iation	on 
6330 Gulfton Street	Houston		TX	77081		
Street Address or Post Office Box	Numbers Cit	у	State	Zip		<u> </u>
I declare under penalty of perjury	under the laws of Kentucky that th	e forg	oing is true and correct.			
BURLO Briticy	Brad Batig		Chief Compliance Officer	5/19/2023	12:29	PM PI
Authorized Party Signature	Printed Name		Title	Date		