#### 44626000

# **Commonwealth of Kentucky** Michael G. Adams, Secretary of St Ky Secretary of State

0874945 Michael G. Adams Received and Filed

3/15/2023 1:06:04 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 Withdrawal of **Assumed Name**

**CWA** 

Pursuant to the provisions of KRS 365.015(5), the undersigned applicant applies to withdraw an assumed name, and for that purpose, submits the following statements:

1. The assumed name to be withdrawn is:

### **RIVERS EDGE TOBACCO OUTLET #5**

2. The assumed name has been discontinued by:

KOTH, Inc.

3. The date the origional certificate was filed:

Wednesday, March 15, 2023

The mailing address is: 4.

### RIVERSEDGET75771@BELLSOUTH.NET, Henderson KY 42420

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

**Nicholas Hidenrite** 

3/15/2023