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Michael G. Adams Kentucky Secretary of State Received and Filed: 5/17/2023 2:23 PM Fee Receipt: \$20.00

COMMONWEALTH OF KENTUCKY	<i>.</i>
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 Name (Domestic or Foreign Business Entity)

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: Liberty Ima	ging				
2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed					
name:					
PG-Gerald, LLC					
Name must be identical to the name on record with the Secretary of State.)					
3. The "real name" is (you must check one):					
a Domestic General Partnership		a Foreign General Part	nership		
a Domestic Limited Liability Partners	ship	a Foreign Limited Liabil	lity Partnership		
a Domestic Limited Partnership		a Foreign Limited Partn	nership		
a Domestic Business Trust		a Foreign Business Tru	ist		
a Domestic Corporation		a Foreign Corporation			
a Domestic Limited Liability Compar	ıy 🖌	a Foreign Limited Liabil	lity Company		
a Domestic Statutory Trust		a Foreign Statutory Tru	st		
a Domestic Limited Cooperative Ass	sociation	a Foreign Limited Coop	perative Association		
a Domestic Unincorporated Non-pro	fit Association	a Foreign Unincorporat	ed Non-profit Association		
4. The business is organized and existing in the state or country of					
5. The mailing address is:					
2097 Abby Lane NE	Atlanta	GA	30345		

Street Address or Post Office Box Numbers City State Zip

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Jonneuran Morgan	Jonathan Morgar	5/15/23		
Authorized Party Signature	Printed Name	Title	Date	