



**COMMONWEALTH OF KENTUCKY**  
**MICHAEL G. ADAMS, SECRETARY OF STATE**

**0076348.09** tsemones  
ASN  
**Michael G. Adams**  
**Kentucky Secretary of State**  
Received and Filed:  
9/19/2022 1:50 PM  
Fee Receipt: \$20.00

**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)**

**ASN**

Pursuant to the provisions of KRS 365.015, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is: Bellevue Sand & Gravel.

2. The real name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:

Northern Kentucky Aggregates, Inc.

**Name must be identical to the real name on record with the Secretary of State.)**

3. The entity type is (you must check one):

- |   |  |
|---|--|
| <input type="checkbox"/> a Domestic General Partnership                   | <input type="checkbox"/> a Foreign General Partnership                   |
| <input type="checkbox"/> a Domestic Limited Liability Partnership         | <input type="checkbox"/> a Foreign Limited Liability Partnership         |
| <input type="checkbox"/> a Domestic Limited Partnership                   | <input type="checkbox"/> a Foreign Limited Partnership                   |
| <input type="checkbox"/> a Domestic Business Trust                        | <input type="checkbox"/> a Foreign Business Trust                        |
| <input checked="" type="checkbox"/> a Domestic Corporation                | <input type="checkbox"/> a Foreign Corporation                           |
| <input type="checkbox"/> a Domestic Limited Liability Company             | <input type="checkbox"/> a Foreign Limited Liability Company             |
| <input type="checkbox"/> a Domestic Statutory Trust                       | <input type="checkbox"/> a Foreign Statutory Trust                       |
| <input type="checkbox"/> a Domestic Limited Cooperative Association       | <input type="checkbox"/> a Foreign Limited Cooperative Association       |
| <input type="checkbox"/> a Domestic Unincorporated Non-profit Association | <input type="checkbox"/> a Foreign Unincorporated Non-profit Association |

4. The entity is organized and existing in the state or country of Kentucky.

5. The mailing address is:

11641 MOSTELLER ROAD

CINCINNATI

OH

45241

**Street Address or Post Office Box Numbers**

**City**

**State**

**Zip**

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

Jason R. Jurgensen  
**Authorized Party Signature**

Jason R. Jurgensen  
**Printed Name**

Chief Operating Officer  
**Title**

8/9/22  
**Date**