

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

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Michael G. Adams  
KY Secretary of State  
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Secretary of State  
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Frankfort, KY 40602-0718  
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**Amended Certificate of Assumed  
Name**

**AAN**

Pursuant to the provisions of KRS chapter 365, the undersigned hereby applies to amend the certificate of assumed name, and for that purpose, submits the following statements:

1. The assumed name is:

**THRIVE EMPOWERMENT CENTER**

2. The certificate of assumed name was filed with the Secretary of State on Friday, December 13, 2019

3. The current mailing address is:

**PO BOX 17592, LAKESDIE PARK KY 41017**

4. The mailing address is changed to:

**226 W Pike St Ste 2, Covington KY 41011**

5. This certificate will be effective upon filing.

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

**Lauren Bailey**