

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

47306160

1203248  
Michael G. Adams  
KY Secretary of State  
Received and Filed

7/11/2022 9:12:10 AM

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 Assumed Name**

**ASN**

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

1. The assumed name is:

**HI I.Q.**

2. The name of the business entity that is adopting the assumed name is:

**Two- Seventeen and Company Limited Liability Company**

3. This application will be effective upon filing.

4. The mailing address is:

**3737 Brookside Dr Apt E, Elsmere KY 41018**

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

**Cordell James**

**Owner**

7/11/2022