

0211050.09 tsemones
ASN
Michael G. Adams
Kentucky Secretary of State
Received and Filed:
3/11/2024 11:08 AM
Fee Receipt: \$20.00

**CERTIFICATE OF ASSUMED NAME
OF
J. W. PHARMACY, INC.**

KNOW ALL MEN BY THESE PRESENTS:

That pursuant to the provisions of KRS 365, J. W. PHARMACY, INC., hereby applies to assume a name, and for that purpose, submits the following statement:

- I. The assumed name is:
Comprehensive Pharmacy Solutions
- II. The real name of the business entity that is adopting the assumed name is:
"J. W. Pharmacy, Inc.", a domestic corporation.
- III. This application will be effective upon filing of this Certificate.
- IV. The business is organized and existing in the state of Kentucky.
- V. The mailing address of the business is 817 Main Street, Benton, KY 42025.

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

J. W. PHARMACY, INC.

By: 
GEORGE M. CARTER, Attorney

Date: 3-11-24