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

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:

VISUAL ARTIST

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

## VISUAL ARTIST EXTERIORS LLC

- 3. The entity is organized and existing in the state or country of KY
- 4. The mailing address is:

10611 Seatonville Road, Louisville KY 40291

This filing will be effective on Wednesday, September 11, 2024.

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

Signature of individual signing on behalf of **President: Timothy Killinder** 

9/11/2024 7:34:10 PM

ASN

9/11/2024 7:34:10 PM

1394451.06 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$20