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Michael G. Adams Kentucky Secretary of State Received and Filed: 2/10/2025 2:20 PM Fee Receipt: \$20.00

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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 following statement: 1. The assumed name is:	365, the undersigned applies to a		purpose, submits the
2. The name of the business entit	y (and in the case of general partr	ership, the partners) that is/	are adopting the assumed
name:	Const. Dente of Dente W.		
Name must be identical to the name	onal Bank of Danville on record with the Secretary of St	ate.)	,
	Partnership Liability Partnership Partnership is Trust stion Liability Company y Trust Cooperative Association porated Non-profit Association	a Foreign General Par a Foreign Limited Liab a Foreign Limited Part a Foreign Business Tr a Foreign Corporation a Foreign Limited Liab a Foreign Statutory Tr a Foreign Limited Coo a Foreign Unincorpora	oility Partnership tnership rust oility Company rust
304 West Main Street	Danville	Kentucky	40422
Street Address or Post Office Box N	lumbers City	/ State	Zîp .
I declare under penalty of perjury u			2-6-2025
Audionized raity signature	Printed Name	i uie	Date