

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

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**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:

**SPOTLESS FLOOR CARE**

2. The certificate of assumed name was filed with the Secretary of State on Wednesday, July 24, 2013

3. The current mailing address is:

**1257 NICE DR., LEXINGTON KY 40504**

4. The mailing address is changed to:

**201 Creekwood Way, Nicholasville KY 40356**

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.

**Tina Craig**