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:

BY EXAMPLE

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

Live The Edge by Example Inc.

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

112 Fontaine Landing Ct, Louisville KY 40212

This filing will be effective on Friday, November 22, 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 **CEO: Herbert Henry** 11/22/2024 1:19:48 PM

C226

1001753.09 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$20

11/22/2024 1:19:48 PM

ASN