

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
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Michael G. Adams  
Secretary of State  
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**Certificate of Assumed Name**

**ASN**

Pursuant to the provisions of KRS 365.015, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

**SHAREMONEY**

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

**OMNEX GROUP, INC.**

3. This application will be effective upon filing.

4. The mailing address is:

**580 SYLVAN AVENUE, ENGLEWOOD CLIFFS NJ 07632**

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

**Darren Manelski**  
**President**  
10/20/2022