



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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ASN

Michael G. Adams
Kentucky Secretary of State
 Received and Filed:
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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 365, the undersigned applies to assume a name and, for that purpose, submits the following statement:

1. The assumed name is: Sexton Insulation & Gutters
2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:

BUILDER SERVICES GROUP, INC.

Name must be identical to the name on record with the Secretary of State.)

3. The "real name" is (you must check one):

<ul style="list-style-type: none"> <input type="checkbox"/> a Domestic General Partnership <input type="checkbox"/> a Domestic Limited Liability Partnership <input type="checkbox"/> a Domestic Limited Partnership <input type="checkbox"/> a Domestic Business Trust <input type="checkbox"/> a Domestic Corporation <input type="checkbox"/> a Domestic Limited Liability Company <input type="checkbox"/> a Domestic Statutory Trust <input type="checkbox"/> a Domestic Limited Cooperative Association <input type="checkbox"/> a Domestic Unincorporated Non-profit Association 	<ul style="list-style-type: none"> <input type="checkbox"/> a Foreign General Partnership <input type="checkbox"/> a Foreign Limited Liability Partnership <input type="checkbox"/> a Foreign Limited Partnership <input type="checkbox"/> a Foreign Business Trust <input checked="" type="checkbox"/> a Foreign Corporation <input type="checkbox"/> a Foreign Limited Liability Company <input type="checkbox"/> a Foreign Statutory Trust <input type="checkbox"/> a Foreign Limited Cooperative Association <input type="checkbox"/> a Foreign Unincorporated Non-profit Association
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4. The business is organized and existing in the state or country of Florida
5. The mailing address is:

475 NORTH WILLIAMSON BOULEVARD DAYTONA BEACH FL 32114

Street Address or Post Office Box Numbers **City** **State** **Zip**

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


Authorized Party Signature

George Seltew President
Printed Name **Title**

03-28-23
Date