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Michael G. Adams **Kentucky Secretary of State** Received and Filed: 5/9/2024 10:01 AM Fee Receipt: \$20.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STAT

Division of Business Filings

Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		Comestic of Assumed Name Domestic or Foreign Business Entity)			
Pursuant to the provisions of KRS following statement: 1. The assumed name is: Car		applies to assume a n	ame and, for t	hat purpose, submits the	
2. The name of the business ent name: Modern Machir Name must be identical to the name or	ity (and in the case of genery Company	Incorporate		t is/are adopting the assumed	
		or State.)			
The "real name" is (you must che a Domestic General Part	2 00 00	a Foreign	Conoral Bart	norship	
a Domestic General Partnership a Domestic Limited Liability Partnership			a Foreign General Partnershipa Foreign Limited Liability Partnership		
a Domestic Limited Partnership		a Foreigr	a Foreign Limited Partnership		
a Domestic Business Trust		a Foreigr	a Foreign Business Trust		
a Domestic Corporation		_ √ _a Foreigr	a Foreign Corporation		
a Domestic Limited Liability Companya Foreign Limited Liability Company				lity Company	
This application will be effective or the delayed effective cannot be	e prior to the date the ap	oplication is filed. The			
5. The business is organized and	d existing in the state or	country of Indiana	-	·	
6. The mailing address is:					
2842 Rand Road		Indianapolis		46241	
Street Address or Post Office Box Nun	nbers	City	State	Zip	
I declare under penalty of perjury		and the second s		rect.	
The	Shane La		esident	0/8/2024	
Authorized Party Signature	Printed Name	Title		Date	