



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State	
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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: Action Pest Control
2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed name:
Rentokil North America, Inc.

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

3. The "real name" is (you must check one):
- | | | |
|--|-------------------------------------|---|
| a Domestic General Partnership | <input type="checkbox"/> | a Foreign General Partnership |
| a Domestic Limited Liability Partnership | <input type="checkbox"/> | a Foreign Limited Liability Partnership |
| a Domestic Limited Partnership | <input type="checkbox"/> | a Foreign Limited Partnership |
| a Domestic Business Trust | <input type="checkbox"/> | a Foreign Business Trust |
| a Domestic Corporation | <input checked="" type="checkbox"/> | a Foreign Corporation |
| a Domestic Limited Liability Company | <input type="checkbox"/> | a Foreign Limited Liability Company |
| a Domestic Statutory Trust | <input type="checkbox"/> | a Foreign Statutory Trust |
| a Domestic Limited Cooperative Association | <input type="checkbox"/> | a Foreign Limited Cooperative Association |
| a Domestic Unincorporated Non-profit Association | <input type="checkbox"/> | a Foreign Unincorporated Non-profit Association |

4. The business is organized and existing in the state or country of Pennsylvania

5. The mailing address is:

1125 Berkshire Blvd., Suite 150	Wyomissing	PA	19610
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.

<u>/s/WILLIAM MCALLISTER</u>	<u>WILLIAM MCALLISTER</u>	<u>SECRETARY</u>	<u>11/15/2023</u>
Authorized Party Signature	Printed Name	Title	Date