

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

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Alison Lundergan Grimes
KY Secretary of State
Received and Filed
6/19/2019 9:54:18 AM
Fee receipt: \$20.00

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Secretary of State
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Certificate of Assumed Name

ASN

Pursuant to the provisions of KRS chapter 365, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

Tri-State Dental Center, PLLC

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

Tri-State Dental Holdings, PLLC

3. This application will be effective upon filing.

4. The mailing address is:

2446 Anderson Road, Crescent Springs KY 41017

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

Jay Sadrinia