

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

1192158.06

mmoore ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 1/8/2025 2:02 PM Fee Receipt: \$20.00

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
following statement: 1. The assumed name is:	a 365, the undersigned applies to assume a nior Family Solutions by (and in the case of general partnership, a LLC		
3. The "real name" is (you must che a Domestic General a Domestic Limited a Domestic Limited a Domestic Busines a Domestic Corpora a Domestic Limited a Domestic Limited a Domestic Statuto a Domestic Limited	I Partnership Liability Partnership Partnership as Trust ation Liability Company ry Trust Cooperative Association porated Non-profit Association a a a a a a a a a a a a a		lity Partnership nership ust lity Company ust
4. The business is organized and	existing in the state or country of Kent	ucky	
5. The mailing address is:			
9700 Ormsby Station Road	Louisville	Kentucky	40223
Street Address or Post Office Box I declare under penalty of perjury dotloop verified 01/08/25 12:07 PM SHQK-60HR-5RZR SHQK-60HR-5RZR	under the laws of Kentucky that the forgoir		Zip

Printed Name

Title

Date

Authorized Party Signature