

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

0759060.09

mmoore AMD

Michael G. Adams Kentucky Secretary of State Received and Filed:

6/17/2024 2:37 PM Fee Receipt: \$40.00

Date

Division of Business Filing P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Amended Certificate of Authority (Foreign Business Entity)	FCA
	ns of KRS Chapter KRS 14A.9 - 040 the undersigned hereby applies entity named below and, for that purpose, submits the following state	
1. The business entity is:	professional service corporation  limited liability company  professional limited liability company  limited cooperative association  other  busines  limited  statutor  non-pro	partnership ry trust
2. The name of the comp	pany is: WESCO INTEGRATED SUPPLY, INC.  (The name must be identical to the name on record with the Second Sec	· · · · · · · · · · · · · · · · · · ·
2 It is an antihy arganizas		cretary of State.)
	d and existing under the laws of the state or country of Delaware	· · · · · · · · · · · · · · · · · · ·
	thority to transact business in Kentucky on 03/18/2010	
5. The entity has changed		
Domicile	Domicile name to Vallen Integrated Supply, Inc.	
Name to	Name to be used in Kentucky to	
Jurisdicti	Jurisdiction of organization to	
	Period of duration	
☐ Form of o	Form of organization	
	Management type:	
6. This application will be	e effective upon filing.	
I declare under penalty of	of perjury under the laws of the state of Kentucky that the foregoing is t	rue and correct.
Stephene Honey	STEPHANIE HENCZ VICE PRESIDEN	

Title

**Printed Name** 

Signature of Authorized Representative