ASN

Commonwealth of Kentucky Michael G. Adams, Secretary of St Ky Secretary of State

Michael G. Adams Received and Filed 3/30/2023 4:03:12 PM Fee receipt: \$20.00

1241161

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Assumed Name

Pursuant to the provisions of KRS 365.015, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

DIAMOND PHYSICAL THERAPY SPORTS AND PERFORMANCE

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

HomeLife Therapy, PLLC

- This application will be effective upon filing. 3.
- The mailing address is: 4.

7105 Autumn Bent Way, Crestwood KY 40014

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

Michael	Thompson
Member	
3/30)/2023