# **Commonwealth of Kentucky**

66606043

1201863 Michael G. Adams Michael G. Adams, Secretary of St Ky Secretary of State Received and Filed

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

## Certificate of Withdrawal of **Assumed Name**

**CWA** 

Pursuant to the provisions of KRS 365.015(5), the undersigned applicant applies to withdraw an assumed name, and for that purpose, submits the following statements:

1. The assumed name to be withdrawn is:

#### **AMYX COUNSELING**

2. The assumed name has been discontinued by:

### Transform, L.L.C.

3. The date the origional certificate was filed:

Thursday, May 18, 2023

The mailing address is: 4.

#### 956 FAIRVIEW STREET, Benton KY 42025

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

**Candace Amyx** 

6/23/2023