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

1156266 Michael G. Adams 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 Assumed Name**

ASN

43693432

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

1. The assumed name is:

### AGING WITH GRACE, AGING IN PLACE--THE HEALTH CLUB FOR **SENIORS**

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

## **Grace Place Adult Day Center LLC**

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

#### 743 ALLENDALE DRIVE, SUITE B, , Lexington KY 40503

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

> **DG Linton Gridley Managing Member** 12/29/2022