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

39872833

1280066 Michael G. Adams Received and Filed

9/18/2023 5:40:25 PM Fee receipt: \$20.00

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

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:

### **BULLITT CARD SHOP**

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

## SALT RIVER LAWN CARE LLC

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

#### 234 Eric Christy Road, Mount Washington KY 40047

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

> **Daniel Kozlowski** Owner 9/18/2023