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# **Commonwealth of Kentucky** Michael G. Adams, Secretary of Sti KY Secretary of State

1031368 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

## **Amended Certificate of Assumed** Name

AAN

Pursuant to the provisions of KRS chapter 365, the undersigned hereby applies to amend the certificate of assumed name, and for that purpose, submits the following statements:

1. The assumed name is:

### **DENOVA BEHAVIORAL HEALTH**

- The certificate of assumed name was filed with the Secretary of State on Wednesday, April 24, 2019
- 3. The current mailing address is:

#### 236 E. REYNOLDS RDSTE C2, LEXINGTON KY 40517

The mailing address is changed to: 4.

#### 1301 Winchester Rd Ste 147, Lexington KY 40505

- 5. This certificate will be effective upon filing.
- I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is 5. true and correct.

**Louis Hairston**