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

0926570 Michael G. Adams Received and Filed

3/28/2022 10:33:21 AM Fee receipt: \$20.00 **Certificate of Assumed Name** 

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

ASN

57039943

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:

### **606 CHROME**

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

## TOP OF THE LINE DESIGNS, LLC

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

### 609 CARTER ST, CORBIN KY 40701 USA

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

> LEE NORMAN MEMBER