APPROVED By Jeff D. Jacob at 1:05 pm, Oct 13, 2022

NONDEPOSITORY DIVISION DIRECTOR KENTUCKY DEPARTMENT OF FINANCIAL INSTITUTIONS



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Michael G. Adams Kentucky Secretary of State Received and Filed: 10/13/2022 1:53 PM

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE 10/13/2022 1:53 PM Fee Receipt: \$20.00

Division of Business Filings Certificate of Assumed Name **ASN Business Filings** (Domestic or Foreign Business Entity) PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 365, the undersigned applies to assume a name and, for that purpose, submits the following statement: 1. The assumed name is: __ 2. The name of the business entity (and in the case of general partnership, the partners) that is/are adopting the assumed Nationwide Mortgage Bankers, Inc. Name must be identical to the name on record with the Secretary of State.) 3. The "real name" is (you must check one): a Foreign General Partnership a Domestic General Partnership a Domestic Limited Liability Partnership a Foreign Limited Liability Partnership ___a Domestic Limited Partnership a Foreign Limited Partnership a Foreign Business Trust a Domestic Business Trust a Foreign Corporation a Domestic Corporation _a Foreign Limited Liability Company a Domestic Limited Liability Company 4. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective cannot be prior to the date the application is filed. The date and/or time is Upon Approval (Delayed effective date and/or time) 5. The business is organized and existing in the state or country of Delaware 6. The mailing address is: 310 A Main Street Lebanon NJ 08833 Street Address or Post Office Box Numbers City State Zip I declare-unde patty of perjury under the laws of Kentucky that the forgoing is true and correct.

Owner

Title

Richard Steinberg

Printed Name

Authorized Party Signature