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mmoore ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 1/9/2024 2:20 PM Fee Receipt: \$20.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Assur (Domestic or Foreign E		ASN	
Pursuant to the provisions of KRS following statement: 1. The assumed name is: 2. The name of the business entity	edy Cash			·
name: SCIL, Inc.	y (and in the case of gone	ar paratoromp, the partitor	oy that local o duophing the	addunica
Name must be identical to the name	on record with the Secreta	ry of State.)		
	Partnership Liability Partnership Partnership s Trust tion Liability Company y Trust Cooperative Association porated Non-profit Associa	a Foreign Lir a Foreign Bu foreign Co a Foreign Co a Foreign Lir a Foreign Lir a Foreign Lir a Foreign Lir b Foreign Un	orporation nited Liability Company	ation
5165 Emerald Parkway - Sui	te 100 Dublir	n OH	d 43017	
Street Address or Post Office Box N		City	State Zip	
i declare under penalty of perjury u		Brien Secre		, 2023