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

0994275 Michael G. Adams Received and Filed

5/18/2023 2:53:29 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

15890034

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:

### SOUTHERN TREATS

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

## **MORELLI'S INC**

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

#### 5511 EAST SHELBIANA ROAD, PIKEVILLE KY 41501

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

> **Cora Stapleton President** 5/18/2023