1211078.06 Michael G. Adams Secretary of State Received and Filed 3/5/2025 10:56:36 AM Fee receipt: \$20

ASN

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

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:

## PRECISION HANDYMAN & REMODELING

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

## HANDYMAN LITE LLC

- 3. The entity is organized and existing in the state or country of KY
- 4. The mailing address is:

## 6718 DEEP CREEK DRIVE, PROSPECT KY 40059

This filing will be effective on Wednesday, March 5, 2025.

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Signature of individual signing on behalf of **Managing Partner: Stephanie Clements** 3/5/2025 10:56:36 AM