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mmoore ASN

Michael G. Adams Kentucky Secretary of State Received and Filed: 10/6/2023 11:16 AM 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 Assumed N (Domestic or Foreign Busines		ASN		
following statement: The assumed name is: The name of the business entitiname: 	Pikeville Garage ay (and in the case of general parts LLC	assume a name and, for that purpo <u>Door</u> and Fence nership, the partners) that is/are ac	Company.		
Name must be identical to the name on record with the Secretary of State.)					
a Domestic Limited a Domestic Busines a Domestic Corpora a Domestic Limited a Domestic Statuto a Domestic Limited	l Partnership Liability Partnership Partnership ss Trust ation Liability Company	a Foreign General Partners a Foreign Limited Liability F a Foreign Limited Partners a Foreign Business Trust a Foreign Corporation a Foreign Limited Liability O a Foreign Statutory Trust a Foreign Limited Cooperat a Foreign Limited Cooperat	Partnership hip Company tive Association		
4. The business is organized and	l existing in the state or country of	Kenticky.			
5. The mailing address is:		T			
P.O. Box Street Address or Post Office Box		ty state	41635 Zip		
I declare under penalty of perjury	under the laws of Kentucky that th	ne forgoing is true and correct.			

 Authorized Party Signature
 Printed Name
 Member
 10-6-23

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