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:

DENT PROS

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

## Lock Pros LLC

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

## 406 Mark Ave, Danville KY 40422

This filing will be effective on Monday, March 24, 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 Manager: Jessie Jenkins

3/24/2025 12:07:12 PM

C226

1288780.06 Michael G. Adams Secretary of State Received and Filed 3/24/2025 12:07:12 PM Fee receipt: \$20

ASN