



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams
Kentucky Secretary of State
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10/11/2024 2:50 PM
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Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Certificate of Withdrawal of Assumed Name
(Domestic or Foreign Business Entity)

CWA

Pursuant to the provisions of KRS 365, the undersigned applicant applies to withdraw an assumed name and, for that purpose, submits the following statements:

- The assumed name to be withdrawn is Advanced Dermatology & Dermaesthetics of Louisville
(The name must be identical to the name on record with the Secretary of State.)
- The assumed name has been discontinued by WILLIAM M. PARSLEY, M.D., P.S.C.
(Must be the exact name of the entity or partners)
- This application will be effective upon filing.
- The date the original certificate was filed: 6/8/2023
- The "real name" is (you must check one):

- ☐ a Domestic General Partnership
- ☐ a Domestic Limited Liability Partnership
- ☐ a Domestic Limited Partnership
- ☐ a Domestic Business Trust
- ☒ a Domestic Corporation
- ☐ a Domestic Limited Liability Company

- ☐ a Foreign General Partnership
- ☐ a Foreign Limited Liability Partnership
- ☐ a Foreign Limited Partnership
- ☐ a Foreign Business Trust
- ☐ a Foreign Corporation
- ☐ a Foreign Limited Liability Company

6. The mailing address is:

310 East Broadway, Suite 200

Louisville

KY

40202

Street Address or Post Office Box Numbers

City

State

Zip

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

George Sonnier

President

Signature of Authorized Party

Printed Name

Title

Date

25 Sept 24