

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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0869085.06

Michael G. Adams

Secretary of State

Received and Filed

12/27/2024 1:10:09 PM

Fee receipt: \$20

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

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:

VAPOR LAB

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

PREMIUM EJUICE USA, LLC

3. The entity is organized and existing in the state or country of **KY**

4. The mailing address is:

3103 FERN VALLEY RD, LOUISVILLE KY 40213

This filing will be effective on **Friday, December 27, 2024.**

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 **Owner: Terry L Burkhead**

12/27/2024 1:10:09 PM