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Michael G. Adams Kentucky Secretary of State Received and Filed: 5/31/2024 3:04 PM Fee Receipt: \$20.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490

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

CWA

(502) 564-3490 www.sos.ky.gov	(Domestic of Foreign	Dusines	. Linuty		
Pursuant to the provisions of KR submits the following statements		olicant ap	plies to withdraw an assi	umed name and, fo	r that purpose,
The assumed name to be withdrawn is Everon (The name must be identical to the name on record with the Secretary of State.)					
	(The name must be i			e Secretary of State.)	
The assumed name has been discontinued by <u>ADT Commercial LLC</u> (Must be the exact name of the entity or partners)					
(Must be the exact hame of the entity of partners)					
 3. This application will be effective upon filing. 4. The date the original certificate was filed: 12/04/2019 					
5. The "real name" is (you must co	end ST-18				
a Domestic General Partnership			a Foreign General Partnership		
a Domestic Limited Liability Partnership			a Foreign Limited Liability Partnership		
a Domestic Limited Partnership			a Foreign Limited Partnership		
a Domestic Business Trust			a Foreign Business Trust		
a Domestic Corporation			a Foreign Corporation		
a Domestic Limited Liab	a Domestic Limited Liability Company		a Foreign Limited Liability Company		
6. The mailing address is:					
1501 Yamato Road	Boca R	Raton	FL	3	33431
Street Address or Post Office Box Nur	mbers Cit	у	Stat	e	Zip
I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct. Denise Bold Denise Bell ATTORNEY IN FACT 05/31/2024					
Signature of Authorized Party	Pri	inted Name	Title	•	Date