ASN

### Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

0300987 Alison Lundergan Grimes KY Secretary of State Received and Filed 9/7/2018 1:03:35 PM Fee receipt: \$20.00

Alison Lundergan Grimes 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 chapter 365, the undersigned hereby applies to assume a name, and for that purpose, submits the following statements:

1. The assumed name is:

# **Hybrid Vehicle Solutions**

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

#### AUTO ALTERNATIVE, INC.

- 3. This application will be effective upon filing.
- 4. The mailing address is:

#### 2004-B N. PARK CENTRAL AVE., NICHOLASVILLE KY 40356

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

Thayre Hawkins, Authorized Rep 9/7/2018